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Chairman of the candidate's Guidance Committee and approved by
all members of the Committee, has been presented to and accepted
by the faculty of the School of Graduate Studies in partial
fulfillment of the requirements for the Master of Arts degree.

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MODERN CONCEPTS OF MIND AND BODY IN THE LIGHT OF THE TEACHING
OF THE BIBLE AND THE WRITINGS OF ELLEN G. WHITE:
A COMPARATIVE STUDY

A Thesis
Presented to
the Faculty of the School of Graduate Studies
Department of Education
Potomac University

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Mabel Klopfenstein Gill.

June 1959

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CHAPTER I

THE PROBLEM AND DEFINITIONS OF TERMS USED

The idea of mind and body relationships is an old one. The statement, "A sound mind in a sound body," goes back to the ancient philosophers, and even more anciently the Bible stated, "As a man thinketh in his heart, so is he."¹ The modern concept provides new horizons and new applications of mind and body relationships.

I. THE PROBLEM

Statement of the problem. The purpose of this study is to compare the conclusions of modern psychology and present-day medical understanding with what has been written by Mrs. Ellen G. White on the subject of the relation of mind and body. Texts of Scripture and Bible examples will also be used. Much material has come into existence since the volumes of Mrs. White's writings appeared, yet the principles they portray are as up-to-date and as applicable as those in current literature. This author also points out warnings and dangers which apply to present principles of psychology. Says Mrs. White:

When God had made man in His image, the human form was perfect in all its arrangements, but it was without life. Then a personal, self-existing God breathed into that form the breath of life, and man became a living, intelligent being. All parts of the human organism were set in action. The heart, the arteries, the veins, the tongue, the hands, the feet, the senses, the faculties of the mind, all began their work, and all were placed under law.²

¹Proverbs 23:7.

²Ellen G. White, The Ministry of Healing, p. 415. (Hereinafter referred to as MH.)

This is the law of nature, the law under which mind and body still operate.

Importance of the study. The study of this subject is important because "as we near the close of time, the human mind is more readily affected by Satan's devices."³ A study of this problem is also justified as a part of Christian education. Mrs. White makes the following comment:

True education means more than the pursual of a certain course of study. It means more than a preparation for the life that now is. It has to do with the whole being, and with the whole period of existence possible to man. It is the harmonious development of the physical, the mental, and the spiritual powers.⁴

Also a study of mind and body is relevant to Christian education, as is shown by the following statement: "The students' employment and amusements should have been regulated with reference to physical law, and should have been adapted to preserve to them the healthy tone of all the powers of body and mind."⁵

And as a climax for the reasons for studying mind and body in Christian education, Mrs. White declares, ". . . the thoughts and feelings combined make up the moral character."⁶

³Ellen G. White, Testimonies for the Church, I, 293. (Hereinafter referred to as 1T, 5T, etc., according to the respective volume number.)

⁴Ellen G. White, Education, p. 13. (Hereinafter referred to as Ed.)

⁵White, 3T, p. 142. ⁶White, 5T, p. 310.

Organization of the material. This thesis is built around the idea of how the mind-body relationship involves the physical make-up, the emotions, and the learning and experience of the individual. The subject is introduced by calling attention to the difference sin has made on mind and body; it shows how Jesus used both of these aspects in His healing of men, and ends with a discussion of individual responsibility for mind and body responses. The principles of psychology appear throughout the pages of Mrs. White's writings, and an understanding of what is profitable and what is unprofitable, a determination of what is right and also what is wrong, appears in obvious ways and in many places. So abundant is material that it is impossible to exhaust it in a single thesis. In many places the use of Holy Scripture also illuminates the study.

More than the usual number of quotations appear in this study. However, this seems necessary in making such a comparison. Quotations from many sources represent present-day concepts of psychology, while the other side is necessarily alone in its contribution. Because of its status and importance, it seems fitting to have it adequately and accurately quoted. Then, while the other side has many sources, in order to do it justice it also seems necessary to support it with many first-hand statements.

History and present status. The old-time physician knew the background of his patients thoroughly, and easily recognized the influence of experience upon his patients' illnesses. Specialization has left many such men out of the present scheme of things, and has replaced

them with medical men with more circumscribed specialties. They are much less familiar with the mental make-up of their patients, but new techniques of medical diagnosis have been developed which have helped physicians to recognize the mental contribution of the patient to his disease. For some fifteen or twenty years the term "psychosomatic medicine" has been freely used in medical literature, and it is now so common that the laity has caught the idea also.

Source of data and method of procedure. This study has covered a number of years. Most of the writings of Mrs. Ellen G. White have been read with this topic in mind. Several courses in psychology have contributed to its development, and concurrently reading of psychological literature has proceeded. Large numbers of notes have been taken, and all of these have been sifted for relevant material.

II. DEFINITIONS OF TERMS USED

Writings of Mrs. White. The writings of Mrs. Ellen G. White form an important part of the denominational literature of the Seventh-day Adventist Church because its members believe them to be inspired. These writings are not a second Bible, but only a lesser light to guide to the greater light, the Holy Scriptures.

Psychosomatic. The term "psychosomatic" is derived from two Greek words, psyche, mind, and soma, body. It means a combination of mind and body in physical dissabilities.

Functional disease. The manifestation is functional rather than organic. That is, there are no alterations in body tissue, but rather disturbance of an organ's activities.

Neurosis. A neurosis is the same as a psychosomatic or functional disease. Sometimes the term "psychoneurosis" is also used, and it has the same meaning.

The autonomic nervous system. The involuntary nerves supplying the visceral organs of the body are known as the autonomic nervous system. Obviously the autonomic nerves are not under the control of the will.

The sympathetic division of the autonomic system. This part of the system speeds up reactions and prepares the body to meet emergencies. The digestive processes, however, are inhibited, so that the energies used in digestion are available for increased activity elsewhere.

The parasympathetic division of the autonomic system. The second division of the autonomic system keeps the body functioning smoothly, and brings about restoration after an emergency has upset the balance. If overly aroused, however, it shows its activity particularly on the digestive system.

The endocrine system. The endocrine system consists of glands like the thyroid and adrenals which have no ducts, but give up their secretion to the blood stream as it passes through them. They are also known as ductless glands.

The exocrine glands. The exocrine glands or duct glands pour their secretion out through tiny ducts to the external surface. The salivary glands and the tear glands are examples of exocrine glands.

Emotion. Emotion is handled by the autonomic nervous system along with certain areas in the brain. Emotion includes all feeling tones.

CHAPTER II

THE INFLUENCE OF SIN ON MIND AND BODY

The study of mind and body can well begin with the entrance of sin. Ellen G. White remarks: "When Adam and Eve were placed in the beautiful garden, they had everything for their happiness which they could desire."¹ A survey of the changes introduced by sin shows up prominently the background for mind and body relationships as they have since developed in the human race.

I. BEGINNINGS

Genesis is a book of beginnings. Not only, "In the beginning God created," but under the tree of knowledge of good and evil, sin and misery, pain and death had their beginning as well. The first temptation, which seemed so inconsequential, carried with it master implications for enormous evil. Involvements were widespread. Eve ate the fruit; she shared it with Adam. They had distrusted God, they had yielded to appetite, they had investigated knowledge God wished withheld. Their happiness and peace were gone, they had misused their power of choice, and they had given their will over to the enemy. Their mental and physical capacities were not only reduced but changed, by one seemingly small disobedience. Mrs. White declares:

After his transgression, Adam at first imagined himself entering upon a higher state of existence. But soon the thought of his sin

¹Ellen G. White, Spirit of Prophecy, I. 27.

filled him with terror. The air, which had hitherto been of a mild and uniform temperature, seemed to chill the guilty pair. The love and peace which had been theirs was gone, and in its place they felt a sense of sin, a dread of the future, a nakedness of soul.²

II. THE LOSS OF GOD'S PRESENCE

The importance of love in the life has received considerable comment in current literature. In Smiley Blanton's book, Love or Perish, there is an introduction written by another person who is unnamed. He remarks:

In simple, direct language he has shown how love is the vital force, the essential ingredient, that binds us together and makes of our every act a new, rich and exciting experience.

Without love--in every form--the collapse of life begins. From the simple drudgery of getting up in the morning to the almost incredible disasters that lead into death itself, there is clear evidence that no man or woman can hope to survive in a life guided by hatred. The alternatives are, indeed, "Love or Perish."

For without love, we lose the will to live. Our mental and physical vitality is impaired, our resistance is lowered, and we succumb to illnesses that often prove fatal.³

The guilty pair, Adam and Eve, had separated themselves from God's companionship. They had pushed His love out of their immediate experience. They had violated their relationship to it. In the act of restoration, "God so loved the world, that He gave His only begotten Son, that whosoever believeth on Him should not perish."⁴

²Ellen G. White, Patriarchs and Prophets, p. 57. (Hereinafter referred to as PP.)

³Smiley Blanton, Love or Perish, introduction on cover of the paperbound edition.

⁴John 3:16. (Italics supplied.)

III. HOW DISEASE ORIGINATED

When evening came on the day of the fall, bringing the time for God's daily visit--the last one--Adam and Eve hid themselves. Already the causes were operating that would lead to mental and physical suffering. Says Mrs. White:

Many of the diseases from which men suffer are the result of mental depression. Grief, anxiety, discontent, remorse, guilt, distrust, all tend to break down the life forces, and to invite decay and death.⁵

Three main causes of disease found their origin on that unhappy day in Eden:

1. Those which arise from wrong eating.
2. Those that have their source in mind and body relationships.
3. Those which result in physical degeneracy.

The cause of Adam's death is not recorded. His years of mental suffering must have contributed to a death which was obviously degenerative.

These three causes of disease are interrelated. "Nine-tenths of diseases from which men suffer," says Mrs. White, "have their foundation here [in the mind]."⁶ "The indulgence of unnatural appetites . . . has a controlling influence upon the nerves of the brain."⁷ "Irregularities in eating destroy the healthful tone of the digestive organs, to the

⁵White, III, p. 241.

⁶Ellen G. White, Counsels on Health, p. 324. (Hereinafter referred to as CH.)

⁷Ibid., p. 36.

detriment of health and cheerfulness."⁸ "Wrong habits of eating and the use of unhealthful food are in no small degree responsible for the intemperance and crime and wretchedness that curse the world."⁹ "In all ages, temptations appealing to the physical nature have been most effectual in corrupting and degrading mankind."¹⁰ Not only the three causes of disease are related, but the transgression of the physical laws is also involved in the moral and spiritual aspects of man's nature. On this, Mrs. White remarks:

The body is the only medium through which the mind and the soul are developed for the upbuilding of character. Hence it is that the adversary of souls directs his temptations to the enfeebling and degrading of the physical powers. His success here means the surrender to evil of the whole being. The tendencies of our physical nature, unless under the dominion of a higher power, will surely work ruin and death.¹¹

IV. THE PATTERN OF RESTORATION

In the beginning God created; in the beginning sin and death entered. Just as from that evil day in Eden man began to feel death through the power of appetite and through the breakdown of the emotions, in restoration Christ gained the victory over appetite, and felt the extreme of emotion in His struggle with sin.

With Christ, as with the holy pair in Eden, appetite was the ground of the first great temptation. Just where the ruin began,

⁸White, MH, p. 384. ⁹Ibid., p. 146.

¹⁰Ellen G. White, The Desire of Ages, p. 122. (Hereinafter referred to as DA.)

¹¹White, MH, p. 130.

the work of our redemption must begin. As by indulgence of appetite Adam fell, so by the denial of appetite Christ must overcome.¹²

The cross constituted the climax of Christ's suffering, but there were other times when His suffering was extreme. One was His experience in the wilderness when He overcame the temptations of appetite and presumption, when He refused the easy way Satan suggested to regain the world in one simple act of homage to the one who claimed the right to its sovereignty.

Mrs. White thus describes Christ's experience:

After the foe had departed, Jesus fell exhausted to the earth, with the pallor of death upon His face. The angels of heaven had watched the conflict, beholding their loved Commander as He passed through inexpressible suffering to make a way of escape for us. He had endured the test, greater than we shall ever be called to endure. The angels now ministered to the Son of God, as He lay like one dying.¹³

When on the cross the penalty was paid at last, Christ died a psychosomatic death. He died from a broken heart, broken with the agonies and guilt of sin. When Adam separated himself from God's immediate presence, he still had access directly to Him. When Christ on the cross was separated from God by the sins of the world, the separation seemed complete. In that dark hour He cried, "My God, my God, why hast thou forsaken me?"¹⁴ The sacrificial lamb died a traumatic death, but Christ shed His blood for the guilt of a fallen world, He passed through the superlative of suffering. He was "a Man

¹²White, DA, p. 117. ¹³Ibid., p. 131.

¹⁴Matthew 27:46.

of sorrows, and acquainted with grief" all through His life, and on the cross "He bore our griefs, and carried our sorrows."¹⁵ This was an anguish beyond human experience.

V. CONCLUSION

Sin brought changes in the physical nature. Grief, guilt, anxiety, depression became the fruitful potentialities that eventually produced disease. Such mental influences now appear in all illnesses and predominate in a long list of present-day disorders. Eating, which was involved in the original sin, is closely related to the mind. When Christ came in the flesh to redeem man, He began where sin began by resisting appetite. He suffered as man had suffered with grief, extreme mental suffering, and with vicarious guilt. He restored the love relationship between God and man. He loved the world and would not let it perish.

¹⁵Isaiah 53:3, 4.

CHAPTER III

THE PHYSIOLOGICAL BACKGROUND FOR THE MIND AND BODY

To understand the relation of mind and body, the physical make-up needs to be studied as well as the psychological. This particularly includes the nervous and endocrine systems. Ellen G. White declares, "As the mechanism of the body is studied, attention should be directed to its wonderful adaptation of means to ends, the harmonious action and dependence of various organs."¹

I. IMPORTANCE OF PHYSIOLOGY

Psychology represents the laws of the mind from the standpoint of its intellectual and emotional functioning, but anatomy and physiology are necessary subjects to complete the understanding of mind and body combination. The Christian goes even deeper in his understanding of this principle. He realizes that "the laws that govern our physical organism, God has written upon every nerve, muscle, and fiber of the body."²

In 1903, when the book Education was written, there was not the flood of psychosomatic literature that now exists, but the study of physiology was emphasized because it explains the influence of mind on body. The electric power of the brain had not then been discovered by

¹White, Ed., p. 198.

²Ibid., pp. 196-97.

physiologists, but it is recognized in this book as a part of the function of the nervous system, and it is now discussed in textbooks on anatomy and physiology.

Mrs. White states on this important interrelationship:

The influence of the mind on the body, as well as of the body on the mind, should be emphasized. The electric power of the brain, promoted by mental activity, vitalizes the whole system, and is thus an invaluable aid in resisting disease. This should be made plain. The power of the will and the importance of self-control, both in the preservation and in the recovery of health, the depressing and even ruinous effect of anger, discontent, selfishness, or impurity, and, on the other hand, the marvelous life-giving power to be found in cheerfulness, unselfishness, gratitude, should also be shown.

There is a physiological truth--truth that we need to consider--in the Scripture, "A merry [rejoicing] heart doeth good like a medicine."³

II. UNDERLYING PRINCIPLES

Bess Cunningham approaches her treatment of mind and body relationships by stating three underlying principles:

1. "No behavior is haphazard." That is, behavior is an orderly, dependable response to stimuli.
2. "Behavior is not fragmentary." The whole organism responds.
3. "We react to total situations." Not only the whole organism responds, but it responds to the total situation.⁴

³White, Ed., p. 197.

⁴Bess V. Cunningham, Psychology for Nurses, pp. 75-111.

III. PHYSICAL MECHANISMS

The nervous system consists, geographically, of the central nervous system and the peripheral nervous system. The brain and spinal cord are considered to be the central nervous system, and the nerve extensions which go out to the various parts of the body comprise the peripheral nervous system. Functionally they must be divided a little differently--voluntary and involuntary. The peripheral nerves are of both kinds.

If the peripheral nerves go to the internal organs which are not under the control of the will, they operate involuntarily. Or if they supply the external parts when they may be consciously controlled, they are voluntary. The involuntary division is variously termed visceral, sympathetic, splanchnic, or autonomic. "Autonomic" has become the word which is used most often in professional literature and is frequently seen in other writing. This is the part of the nervous system most concerned with the body-and-mind functional combination. Of course the mind itself functions in the relation, particularly the hypothalamus, which contains the emotional centers, and the cerebral cortex, which supplies conscious recognition to emotion. However, much function is completely unconscious.

There are two divisions to this system, the sympathetic and the parasympathetic. Fibers from each of these two parts supply practically all of the visceral organs as well as such external parts as the sweat glands, the tiny erector muscles connected with the hair follicles, and

the ciliary, or accommodation, muscle of the eye. Unlike the sensory and motor nerves, of which the sensory nerves go to the brain and the motor nerves come from the brain to the part served, the two divisions of the autonomic system both go to the organ. On the whole, the sympathetic division accelerates a function, and the parasympathetic tends to keep the system running smoothly and normally. The sympathetic nerves have their origin in ganglia distributed along the outside of the vertebrae, with the preganglionic fibers extending into the spinal cord, and the postganglionic fibers reaching out to the various organs. The parasympathetic or cranio-sacral division has its origin in the brain, with other fibers arising outside the sacral part of the spinal column. Of the twelve cranial nerves, the third, the seventh, the ninth, the tenth, and the eleventh all carry parasympathetic fibers as well as sensory and motor, or motor fibers alone.

These two sets of nerves have control of all of the involuntary functions of the body, such as the movement of internal organs, and the secretions of the glands. They are very sensitive to the external conditions under which the body operates. While they function as a unit, they are not entirely independent of other parts of the nervous system.

Our thinking results in a total body response through the activity of these nerves, so that in truth, man thinks with his bones, skin, blood, and in fact with every organ of the body. The entire bodily functions respond constantly to the emotional tone of thinking. Under strong emotion, like fright, the autonomic system sets up an emergency reaction. The sympathetic functions predominate over the

parasympathetic. The pupils dilate, the respiratory rate increases, the heart action is accelerated, the circulation is speeded up, and the liver pours more glucose into the blood stream. The digestive parts of the organism are inhibited, and thus turn over extra blood and energy to the parts of the body where it is needed for activity in meeting the emergency.

IV. RESULTS OF IMBALANCED NERVOUS FUNCTION

Stagner gives some important facts about the results of imbalanced nervous function:

Pleasantness is often, although not always, related to activity of the parasympathetic (cranio-sacral) division of the autonomic, the section which speeds up digestion, slows down the heart rate, and generally leads to relaxation. Unpleasantness is likely to involve the activity of the sympathetic (thoracic-lumbar) region of the autonomic, which accelerates the heart, raises the blood pressure, shunts digestion aside, and generally prepares for violent action. Excitement, whether in a context of pleasant or of unpleasant feeling, is associated with the physiological effects listed for unpleasantness. The visceral picture in the case of depression is confused. . . .

It has long been known, for example, that personal maladjustment is often associated with the occurrence of stomach ulcers. This can be related to the effect of prolonged excitement and unpleasant feeling upon the digestive processes. Maier and Parker (1945) found that even rats will develop stomach inflammations from repeated exposure either to unpleasant auditory stimuli or to a painful conflict situation.⁵

A picture of nervous imbalance is given by Mrs. White as follows:

When the minds of ministers, school teachers, and students are continually excited by study, and the body is allowed to be inactive, the nerves of emotion are taxed, while the nerves of motion are

⁵Ross Stagner, Psychology of Personality, pp. 85-86.

inactive. The wear being all upon the mental organs, they become overworked and enfeebled, while the muscles lose their vigor for want of employment.⁶

Here is an imbalance between the central or voluntary nervous system and the autonomic or involuntary system showing up in results that are both mental and physical. From these quotations it is easy to see that disturbance between two parts of the autonomic nervous system, or between the central and the autonomic nervous systems, upsets function, and if such conditions last long enough or are frequent enough, bodily function could be so disturbed as to produce disease.

V. HOW THE AUTONOMIC NERVOUS SYSTEM PRODUCES DISEASE

Dr. Harold Shryock asks the question, "By what means can the autonomic nervous system produce disease?" The following are his conclusions about these means as worked out from a German author, Leopold Alkam:

The (1) smooth muscles and (2) glands of the body are enervated by nerve fibers of the autonomic nervous system which, in turn, is controlled from the same region of the brain (hypothalamus) as provides for the emotional responses of the organism. . . .

1. Persistent contraction of the circular smooth muscle in the wall of a hollow organ producing a relative anemia of the region with consequent lack of nutrition. This is one proposed explanation of the cause of peptic ulcer, ulcerative colitis, etc.

2. Persistent or recurrent spasm of the smooth muscle of tubular organs leading to hypertrophy of the muscle with secondary dilatation, as in dilatation of the esophagus or hypertrophy of the left ventricle in essential hypertension.

⁶White, 31, p. 490.

3. Persistent or recurrent spasm of the smooth muscle of a tubular organ producing stasis of the fluids which normally pass through the organ as in cholesterol stone of the gall bladder or congestive esophagitis.

4. Persistent spasm of the smooth muscle in the wall of a tubular organ producing such stasis, under pressure, of the contents of the organ as to favor the development of an infectious process as cases of infection occurring in gall bladder obstruction.

Cameron amplifies these statements in the following way:

Visceral tensions and glandular activity, once aroused, are very likely to persist and to spread without further stimulation. This is because smooth muscle is normally slow to contract, slower still to relax, and capable of maintaining a state of tension with little fatigue. It is because the distribution of smooth muscle, as for example in the vast blood-vessel network, is practically coextensive with the body itself. Finally it is because glandular secretions circulate until broken down or excreted, and because they act both upon the autonomic nervous system, and directly back upon the glands, to continue their own secretory activities.⁷

These quotations describe the mechanism of psychosomatic disease, and it should be clear that the mind-body dichotomy in functional disease produces actual, not imaginary, symptoms, and that there is demonstrable pathology present in some of them. Many people who glibly use the vernacular terminology, "It is all in the head," are unaware of the fact that such disease is actual, but caused by the emotions and not by merely thinking that one is sick. Emotions are common equipment given by the Creator to all humankind; therefore, all are subject to psychosomatic disease. There are individual differences in potentiality due to various factors, but nevertheless there are universal possibilities.

⁷Harold Shryock, M.D., "Psychobiology," Chap. 2, p. 9. (Mimeographed.)

⁸Norman Cameron, The Psychology of Behavior Disorders, p. 74.

Many emotional experiences are beyond the control of the individual, or are even more intense than he is able to handle.

Wolf and Wolff were able to observe a man with a gastrostomy over a period of months. They found that when the man experienced sudden fear, the walls of his stomach paled, but with anxiety the mucosa reddened. If the anxiety continued, small hemorrhages developed and the formation of mucus failed, so that acid affected the tissues. This picture conforms to the fact that fear acts to dilate the pupils, dilate the bronchial tubes, quicken the heart beat, increase the release of glycogen from the liver, and check the secretion of glands and the process of digestion. The circulation to the digestive organs is depressed, and the blood usually normal to these areas is directed to other parts, as the muscles, for instance, where activity will contribute to safety. On the other hand, anxiety showed up objectively in an excessive supply of blood to the stomach.⁹

Dr. Hans Selye of Montreal has done some extensive work with white rats on what he calls the "adaptation syndrome." He subjects these little animals to various forms of frustration, and at the height of the reaction kills them and examines their organs. He found that not only the stomach, but the whole viscera responded to such stimuli. His animal findings corresponded to the findings of the doctors on the

⁹Arthur N. Jay, "Is It Indigestion?" American Journal of Nursing, November, 1958, p. 1553, citing Wolf and Wolff, Human Gastric Function.

human subject, and furnished even greater inclusiveness, as he could examine the whole visceral content.¹⁰

VI. OTHER AREAS WHERE THE AUTONOMIC FUNCTIONS

There are other areas where the mind and body function as a unit. The lie detector uses changes due to nerve connections to interpret truthfulness. Its gadgets measure blood pressure, changes in respiration, pulse rate and skin moisture to detect emotional changes in the individual. These changes which develop during questioning interpret emotional response. A large number of medications depend upon various parts of the nervous system for their curative effects. When a dentist uses hypnotism to extract a tooth without pain, he is using the autonomic nervous system. Some of the miraculous healing seen in these times also has its success because of the action of the autonomic nervous system.¹¹

VII. MRS. WHITE ON AUTONOMIC ACTION

Described as accurately as in modern medical literature is the activity of the autonomic nervous system as found in the writings of Ellen G. White. Mrs. White declares:

The nerves proceeding from the brain control the body. By the brain nerves, mental impressions are conveyed to all the nerves

¹⁰Norman P. Schenker, M.D., and Leo Leveridge, M.D., "A Medical Teaching Film," made in collaboration with Hans Selye, M.D., Stress and the Adaptation Syndrome. This film is supplied by Pfizer Laboratories, Brooklyn, N. Y.

¹¹See Fig. 1, p. 22.

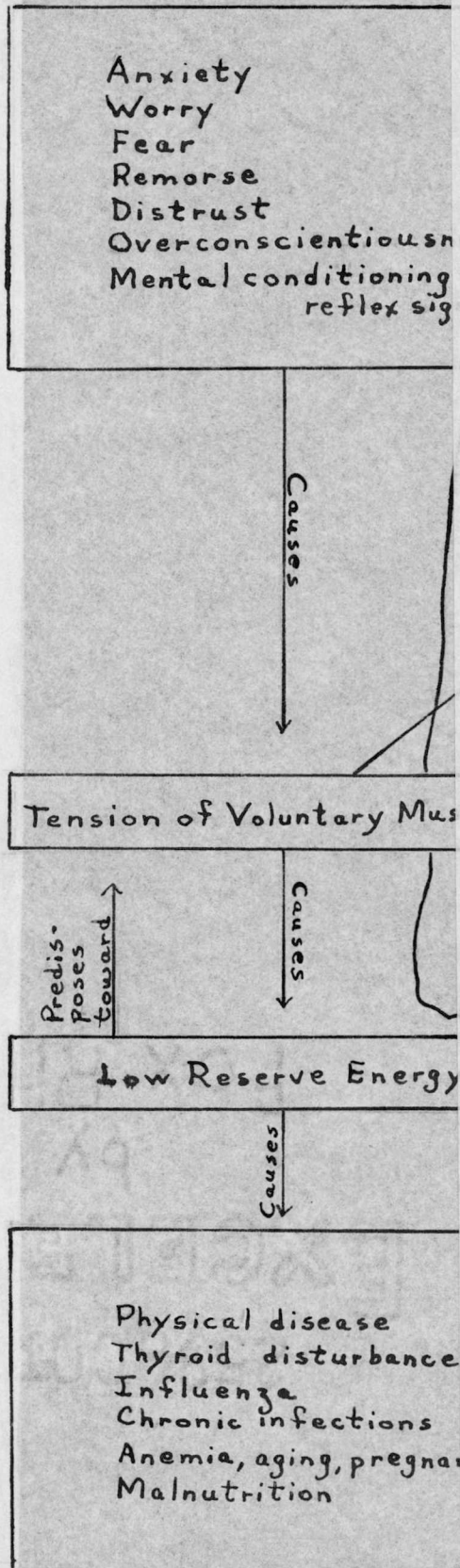


FIGURE 1.
EFFECTS OF TENSION

of the body as by telegraph wires; and they control the vital action of every part of the system. All the organs of motion are governed by the communications they receive from the brain.

If your mind is impressed and fixed that a bath will injure you, the mental impression is communicated to all the nerves of the body. The nerves control the circulation of the blood; therefore the blood is, through the impression of the mind, confined to the blood-vessels, and the good effects of the bath are lost. All this is because the blood is prevented by the mind and will from flowing readily, and from coming to the surface to stimulate, arouse, and promote the circulation. For instance, you are impressed that if you bathe, you will become chilly. The brain sends this intelligence to the nerves of the body, and the blood-vessels, held in obedience to your will, cannot perform their office and cause a reaction after the bath.¹²

The circulation of the blood is a function of the autonomic system which also indirectly controls the heart, and directly, the dilation and constriction of the blood vessels.

In order to have good health, we must have good blood; for the blood is the current of life. It repairs waste, and nourishes the body. When supplied with the proper food elements and when cleansed and vitalized by contact with pure air, it carries life and vigor to every part of the system. The more perfect the circulation, the better will this work be accomplished.¹³

VIII. BODY CHEMISTRY HELPS CONTROL BALANCE

The basis for balance in the body lies partly in the chemical supply to the body. The autonomic nerves, according to the neuro-humeral theory, assume the manufacture of chemicals at the synapses and myoneural junctions. All parasympathetic and preganglionic sympathetic fibers are classified as cholinergic, and the sympathetic, except those going to the sweat glands, the arterioles of the muscles and the

¹²White, 31, pp. 69-70.

¹³White, III, p. 271.

uterus, are adrenergic, or adrenalin producing. Whenever cholinergic fibers are stimulated, the activities involved are inhibited, and whenever adrenergic fibers are stimulated, they bring about acceleration.¹⁴

Another source of body chemistry is the glands. The endocrine glands have a most direct effect, because they pour their chemicals directly into the blood stream. The exocrine glands are mostly in the digestive system, or in the case of the sweat glands and sebaceous glands, in the skin. These glands are more indirect in the results of their function.

The endocrine glands have much to do with well-being directly, as they influence function and feelings of well-being or discomfort. As they change the appearance and make the individual conspicuous or a misfit, they contribute to unhappiness, inferiority feelings, and maladjustment.

A large goiter is unsightly and makes its owner feel conspicuous. Over- and under-functioning pituitaries, resulting in an extra-tall

¹⁴The nerve impulse itself, according to the present theory, takes place by a process of depolarization. During transmission, positive charges change to negative and are immediately restored to positive as the impulse progresses along its route. The areas where the nerves connect with other nerves are known as synapses. The endings terminating in muscle tissue are myoneural junctions. At the synapses nerve fibers do not make actual contact with the next nerve to which the impulse passes in the reflex arc. Transmission of nerve impulses across these synapses is accounted for by two main theories--the neuro-humeral and the electric. The neuro-humeral assumes that chemicals stimulate the nerve endings to continue the impulse. According to the electrical theory, an electrical stimulation carries the impulse across. "Much evidence has accumulated in support of both electrical and chemical theories. . . . It may well be that they are not mutually exclusive." Catherine Anthony, Textbook of Anatomy and Physiology, pp. 256-57.

person or one who is too small, also affect the personality. When too much thyroid secretion is being poured into the blood stream, nervousness will result. These are only a few facets of adjustment as it is bound up with the endocrine system.

IX. CONDITIONING AND PSYCHOSOMATIC DISEASE

Another situation resulting in psychosomatic disease has its origin in conditioning. It is possible to lay down patterns in the nervous system that make for maladjustments and even disease. A child awakens in the morning with nausea. He vomits, and it is evident that he cannot go to school. The child is glad to stay at home and be taken care of by his mother. Six weeks later he dreads to go to school because he must face the teacher about some delinquent assignment. The nervous system comes to his rescue with the former pattern of escape. The dread turns into faintness, nausea, and perhaps a headache. This, of course, is unplanned and entirely unconscious, but the body has learned a way to respond to unpleasant situations by feeling ill. This conditioning is after the same fashion as that of Pavlov's dogs who learned to salivate at the sound of a bell.

During World War II a sailor served in the San Diego area. It was possible for him to maintain a home and still perform his military duties, so his wife followed him from their home in the Midwest. Whenever it became evident that the sailor might be shipped out, the wife became ill. Time after time he seemed about to be put on the list to go across, and with each prospective, the wife became ill from one

cause or another. Sometimes it was some digestive trouble, symptoms that pointed to gall bladder difficulty, one time it was a kidney infection that produced symptoms out of all comparison with what the pathology represented, and the last time it was pernicious vomiting accompanied by great prostration and disorientation. This woman was given every medical attention, first in a good private hospital, and then in the Naval hospital. Finally the Navy solved the problem by discharging her husband. They returned to their Midwest home, and no doubt her health likewise returned. Such patterns are set up in childhood. They represent the individual's adjustment to difficult problems, and are a product of conditioning.

The war neuroses suffered by some soldiers were ailment adjustments. The problem, too big or too painful for the men, came out in a physical condition that solved the problem for them. The person was actually blind or paralyzed. The mind, without his conscious consent, had mercifully blocked out responses to what was beyond his capacity to handle. These men were not cowards, but they needed psychiatric help to solve their problems.

X. IMAGINATION AND DISEASE

Little disease of mind and body is malingering, and even imaginary disease constitutes a small part. Disease has its origin in the emotions more often than in the imagination, but the imagination can produce disease that is real.

Disease is sometimes produced, and is often greatly aggravated, by the imagination. Many are lifelong invalids who might be well if they only thought so. Many imagine that every slight exposure will cause illness, and the evil effect is produced because it is expected. Many die from disease, the cause of which is wholly imaginary.¹⁵

Here, the person lets his imagination go wild with fear. Sometimes a misunderstood medical term suggests a condition more serious than actually exists. Sometimes one has a long illness and develops more care-taking of himself than is called for, and from fear of taking chances, keeps on being an invalid. Whether the ailment is from emotional stress, an ailment adjustment due to conditioning, or an imaginary condition, the autonomic nervous system acts in about the same way.

XI. CONCLUSION

Both psychology and physiology are necessary in understanding the mind and body relationship. The brain is the capital of the body. Its extensions, in the form of nerves, reach all parts. This arrangement provides for a total and consistent response to all stimuli. The autonomic nervous system plus the endocrine system are particularly concerned with this control and constancy of body functions. The autonomic operates in close connection with the emotional centers in the brain, and this explains the close relation between the emotions and functional disease.

¹⁵White, ML, p. 241.

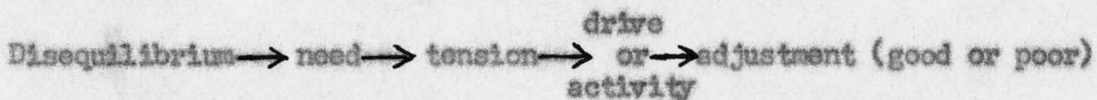
CHAPTER IV

HUMAN NEEDS AND ADJUSTMENTS

Health, both mental and physical, is the result of satisfied needs. Much can happen between the time a need is made evident and the time it has been satisfied. Human behavior fills this gap.

I. UNIVERSAL NEEDS AND HUMAN BEHAVIOR

The human body constantly maintains a state of equilibrium within certain rather fixed limits. This is known as homeostasis, and it means that if temperature ranges above or below a certain number of degrees, the body does not survive; if the blood cell count exceeds or decreases below set limits, death follows; and so it is with every bodily condition.¹ Any excess or deficiency is expressed in a need, a need immediately sets up tension, which provokes activity or drive, which lasts until some sort of adjustment relieves the tension, stops the activity, satisfies the need, and has achieved some sort of adjustment, be it adequate or inadequate.



Satisfactory living depends upon the fulfillment of certain basic needs, sometimes referred to as universal needs. These are

¹The human body is very adjustable, and sometimes the limits of theoretical homeostasis are exceeded with survival.

listed in various ways by different authors. Bess Cunningham gives them as "a need to be safe and emotionally secure, a need for approval, love and affection, a need to belong, and a need to prove . . . personal integrity."² Britt quotes Thomas' four wishes in Social Psychology of Modern Life: (1) for new experiences; (2) for security; (3) for response; (4) for recognition.³ Symonds, quoting from A Theory of Human Motivation by A. H. Maslow, lists the following as Maslow's hierarchy: There are first level or basic physiological needs, then the second level or a need for safety, the third level or the need for love, the fourth level or the need for self-esteem, and the fifth level or the need for self-realization. Symonds adds:

The healthy man is one whose basic needs have been met so that he is principally motivated by his needs to develop and actualize his highest potentialities. The maladjusted and neurotic person, on the other hand, is one who is dominated by his more basic needs. Since his previous insecurities have never made him feel entirely safe with regard to gratification of his more basic needs, he is never quite free to turn his attention to activities of self-realization and achievement.

These needs and their fulfillment are so tied to the emotional life that they make it satisfactory or unsatisfactory, and in turn keep one healthy or make one ill, not only mentally ill, but physically ill

²Bess V. Cunningham, Psychology for Nurses, p. 134.

³Stewart Henderson Britt, Social Psychology of Modern Life, p. 107.

⁴Percival Symonds, Dynamic Psychology, p. 36.

as well. The psychotic person is thought of as mentally ill, but his mental illness only predominates. There are physical accompaniments as well. There is the agitated patient who is always restless, the body suffering with the mind. There is the violent patient who has abnormal strength, the body responding with the mind. The depressed patient is physically as well as mentally miserable. The patient suffering from catanomia⁵ is also manifesting his mental state through his physical attitude. Whenever the mind and body relationship is disturbed, there is resultant psychosomatic expression. These lists of human needs supply the key that can lead to discovery of causes.

A drive is persistent as long as the need is present. The tissue needs of the body activate these stimuli for drives, and as long as the need persists the visceral or protective stimuli arouse discomfort. Organic drives, therefore, differ from peripheral stimuli (those which originate outside the body) in the persistence over a period of time.⁶

When there are unsatisfied needs, there is also an emotional state, and if the need is emphatic, the emotional state is acute, with bodily reaction, but if the need is chronic, some sort of adjustment is made to it, and if the individual does not have adequate resources, the adjustment will relieve the need, but there will be a maladjustment as far as its efficiency is concerned. All behavior has value to the one who uses it, so even a maladjustment has value. Behavior has been selected which has reduced the drive and has satisfied the need.

⁵Catanomia is a form of schizophrenia in which the patient maintains a fixed bodily position for hours at a time.

⁶Symonds, *op. cit.*, p. 17.

II. ANXIETY AND UNMET NEEDS

Some poor adjustments are not immediately important healthwise. They make a poor personality and perhaps furnish the background for big adjustments that do matter to the health, but as long as they do not involve any great catastrophes, their health effect is minor. Anxiety is related to many maladjustments, and as Symonds points out, "Anxiety occupies a focal position in the dynamics of human behavior."⁷ There are many threats and consequent anxiety--threats of competition, of failure, of rejection and deprivation, of physical harm, of self-esteem, of adequacy and social status. Both child and adult are surrounded by threats, each on his own level. Any unfulfilled, universal need may leave the individual with anxiety, and this anxiety leads to the consequence of mind and body disturbance, and can lead to actual disease. Much of it rights itself promptly, and much other leads to a sort of chronic lack of efficiency, or potentialities ready to operate in the event of calamities. Anxiety need not be acute. It can amount to no more than an uncomfortable anticipation or mood.

III. THE CHRISTIAN'S ATTITUDE

The Bible is full of most wonderful promises. Sin brought anxiety as one of its penalties, but God provides a remedy even while sin is still with us. "Peace I leave with you, my peace I give unto

⁷Ibid., p. 116.

you. Let not your heart be troubled, neither let it be afraid."⁸ "Cast thy burden upon the Lord, and he shall sustain thee,"⁹ For loss of love, He promises, "I have loved thee with an everlasting love";¹⁰ for insecurity, He says, "My God shall supply all your need,"¹¹ To bolster up personal integrity, the Bible says, "I will make a man more precious than fine gold."¹²

Only the sense of God's presence can banish the fear that, for the timid child, would make life a burden. Let him fix in his memory the promise, "The angel of the Lord encampeth round about them that fear Him, and delivereth them." Let him read that wonderful story of Elisha in the mountain city, and, between him and the hosts of armed foemen, a mighty encircling band of heavenly angels. Let him read how to Peter, in prison and condemned to death, God's angel appeared; how, past the armed guards, the massive doors and great iron gateway with their bolts and bars, the angel led God's servant forth in safety. Let him read of the scene on the sea, when to the tempest-tossed soldiers and seamen, worn with labor and watching and long fasting, Paul the prisoner, on his way to trial and execution, spoke those grand words of courage and hope: "Be of good cheer; . . . for there stood by me this night the angel of God, whose I am, and whom I serve, saying, Fear not, Paul; thou must be brought before Caesar; and, lo, God hath given thee all them that sail with thee." In the faith of this promise Paul assured his companions, "There shall not a hair fall from the head of any of you." . . . "They escaped all safe to land."¹³

IV. CONCLUSION

In order to function, the body must be kept in a constant state of equilibrium or homeostasis. Variations in body conditions must be

⁸John 14:27. ⁹Psalms 55:22. ¹⁰Jeremiah 31:3.

¹¹Philippians 4:19. ¹²Isaiah 13:12.

¹³White, Ed., pp. 255-56. The Scriptures are Psalms 34:7 and Acts 27:22-24, 34-44.

within comparatively narrow limits. Small deviations result in reduced health and vitality and then in illness, and those not much greater bring death to the organism.

There are certain needs common to all, which when met give health and well-being, but when unmet produce mental maladjustment or physical disease. These needs are on both physical and intellectual levels, provisions for the body's needs, for security, acceptance, love, and self-realization. Whether the need is predominantly physical or mental, both states operate in its fulfillment.

Anxiety is a by-product of unfulfilled need, and a potent contribution to behavior. Sin brought with it anxiety, but to the Christian God's Word is full of promises to meet all the universal needs and to care for all anxiety.

CHAPTER V

THE RELATION OF ENVIRONMENT TO MIND AND BODY

Environment begins prenatally and extends throughout life. The home with its living conditions, and particularly its form of discipline, is the most important factor in environment. Other influences, such as playmates, school, religious contact, and community, begin to operate early. The occupation makes its contribution, and the wider environment of nationality and culture provides its share in making people what they are.

I. PRENATAL ENVIRONMENT

Because there are no nerve connections between the mother and the fetus, prenatal influence has sometimes been minimized, but the present trend is to give it more recognition. There may be no nerve connections, but there is chemical relation provided by the bloodstream. The placenta is nourished by the mother's blood, and in turn the placenta participates in the fetal circulation.¹

¹About ten days after pregnancy begins, the ovum embeds itself in the endometrium or uterine lining, by a process known as implantation. This is accomplished by means of enzyme activity which digests out a spot in the area where the placenta attaches itself. Minute blood vessels are opened in this way and form tiny pools of blood. Villi from the chorion, or outer layer of the sac containing the products of pregnancy, extend into this blood. These villi contain blood vessels that also go on into the placenta, but they do not take up the blood as such. The process by which the oxygen and nutrition from the mother's blood reaches the fetal circulation is diffusion, the same

If even the blood² is affected by the thoughts and emotions, a happy frame of mind, or, on the other hand, an unhappy mood, influences the autonomic nervous system and the endocrine glands, and eventually does reach the fetus. Drugs given a mother just before the birth of the baby show up in effects on the baby when it is born, and even communicable diseases find their way through the placental barrier. Samson's mother was warned not to drink wine or to eat anything unclean.³

Especially does responsibility rest upon the mother. She, by whose life-blood the child is nourished and its physical frame built up, imparts to it also mental and spiritual influences that tend to the shaping of mind and character. It was Jochebed, the Hebrew mother, who, strong in faith, was "not afraid of the king's commandment," of whom was born Moses, the deliverer of Israel. It was Hannah, the woman of prayer and self-sacrifice and heavenly inspiration, who gave birth to Samuel, the heaven-instructed child, the incorruptible judge, the founder of Israel's sacred schools. It was Elisabeth, the kinswoman and kindred spirit of Mary of Nazareth, who was the mother of the Saviour's herald. . . .

The effect of prenatal influences is by many parents looked upon as a matter of little moment; but heaven does not so regard it. . . .

The well-being of the child will be affected by the habits of the mother. Her appetites and passions are to be controlled by principle. There is something for her to shun, something for her to

way in which these materials reach the tissues of the mother herself. The fetus has its own blood-making organs and its own circulation, but since the circulation must take in the placentas, it is routed somewhat differently from the postnatal circulation.

²Britt, Social Psychology of Modern Life, in the chapter, "Biological Bases for Human Behavior," states: "As a matter of fact, however, we not only use our brains in thinking, but also our blood stream, our internal cellular structure, our skeletal musculature and our 'guts'" (p. 30). The blood is affected in at least two ways as it cooperates in responses. (1) Its rate of circulation is speeded or retarded by the vasomotor nerves. (2) Its chemical content is constantly subjected to endocrine activity.

³Judges 13:4.

work against, if she fulfills God's purpose for her in giving her a child. If before the birth of her child she is self-indulgent, if she is selfish, impatient, and exacting, these traits will be reflected in the disposition of the child. Thus many children have received as a birthright almost unconquerable tendencies to evil.

But if the mother unswervingly adheres to right principles, if she is temperate and self-denying, if she is kind, gentle, and unselfish, she may give her child these same precious traits of character.⁴

God begins His record of a human being long before birth. "Thine eyes did see my substance, yet being imperfect; and in thy book all my members were written, which in continuance were fashioned, when as yet there were none of them." This is David's statement, but Job is even more specific with the beginning of the record. He says, "Let the day perish wherein I was born, and the night in which it was said, There is a man child conceived."⁵

Before the child is ready for birth, nerve connections are formed, and some of them are functioning, particularly motor and sensory nerves.

"It seems plausible that the phenomenal field prior to birth is probably differentiated very largely in terms of touch."⁶ Symonds sees the autonomic beginning to function with birth, evidenced by the flush of blood to the exterior parts. The beginning of respiration and the first use of the vocal cords are also evidence of autonomic activity.⁷

⁴White, *ML*, pp. 372-73. ⁵Psalms 139:16; Job 3:2.

⁶Donald Snygg and Arthur W. Combs, *Individual Behavior*, footnote, p. 80.

⁷Percival Symonds, *Dynamic Psychology*, p. 122.

II. HOME ENVIRONMENT

The home furnishes the most powerful factor in environment.

The mother is still the most important figure, particularly at first.

Of the more manifest kinds of frustrations, one that is commonly recognized as being highly important in the first year of life relates to feeding. . . . On the whole, children who are brought to child-guidance clinics for study and treatment have had very unsatisfactory nursing experiences. Frequently they have been nursed by their mothers for only a few weeks and then shifted to the bottle because the mother's milk has been inadequate, or for some deeper psychological reason. In some cases, there seems to have been no attempt to nurse the child at the breast from the beginning. Psychological studies would indicate that bottle feeding never satisfactorily compensates for breast feeding. On the other hand, some normal children who seem to be making splendid adjustments in all phases of development have frequently been nursed by their mothers for a period of several months, sometimes over a year, and then have not been weaned from the bottle until several months later. The weaning process is one of the greatest frustration threats experienced by the young child and may be thought of as a prototype of all later frustrations. The degree to which a child is helped to make this new adaptation easily and without frustration seems to have an important bearing on the degree to which this same individual is able to meet many of life's later frustrations.⁸

Long before psychologists had thought of the effects of nursing on the infant, Mrs. White had given the subject consideration:

The best food for the infant is the food that nature provides. Of this it should not be needlessly deprived. It is a heartless thing for a mother, for the sake of convenience or social enjoyment, to seek to free herself from the tender office of nursing her little one.⁹

The attitudes of the mother from the very first are of inestimable importance.

⁸Ibid., p. 53.

⁹White, *ML*, p. 383.

It is generally accepted that the most potent of all influences on the social behavior is derived from the primary social experience with the mother. If a mother maintains toward the child a consistent attitude of, let us say, indifference and hostility, the assumption is made that the child's personality is greatly affected thereby. His outlook on life, his attitude towards people, his entire psychic well-being, his very destiny is presumed to be altered by the maternal attitude. Life under a regime of maternal indifference develops a psychic pattern of quite a different mold than under a regime of maternal overprotection. Psychiatrists regard the difference as great as though the children concerned lived in entirely different worlds.¹⁰

Surely the mother has precious opportunities to guide the little one so that its development shall be of the highest type. "Even the babe in the mother's arms may dwell as under the shadow of the Almighty through the faith of a praying mother."¹¹

Infancy is not too young to begin habit-forming. "More than any natural endowment, the habits established in early years will decide whether a man shall be victorious or vanquished in the battle of life."¹² "To the lack of right home training may be traced the larger share of the disease and misery and crime that curse humanity."¹³ "To a great extent the parents hold in their own hands the future happiness of their children."¹⁴

Love and affection furnish important background for both mental and physical health--love tied to a stable, constant environment, that

¹⁰David M. Levy, M.D., Maternal Overprotection, pp. 3-4.

¹¹White, IM, p. 512.

¹²Ellen G. White, Messages to Young People, p. 134. (Hereinafter referred to as MYP.)

¹³White, IM, p. 351. ¹⁴White, IT, p. 393.

leaves no question that it is there ready for any demand. In a speech at Union College, Lincoln, Nebraska, Mrs. Ramona Deitemeyer, who was Mrs. America for 1956, is reported as saying: "Children reared in a good environment can withstand virtually any earthly storm that may beset them."¹⁵

Frustration in infancy is an important determining factor of personality throughout life. There are reasons to believe that personality is formed through the frustrations experienced in infancy. As an infant reacts to his various deprivations and shocks, lifelong patterns for reaction are established.¹⁶

III. DISCIPLINE

The influence of the home is not only in its attitudes and atmosphere, but much of it is rooted in the type of discipline used by the parents. Whether the discipline is mild, severe, indulgent, consistent or domineering, will tell in the total make-up of the individual. Discipline is clearly treated in the writings of Mrs. White: its correct methods, its wrong methods, and the telling consequences of both.

The object of discipline is the training of the child for self-government. He should be taught self-reliance and self-control. Therefore as soon as he is capable of understanding, his reason should be enlisted on the side of obedience. Let all dealing with him be such as to show obedience to be just and reasonable.¹⁷

¹⁵Chapter Exchange, April, 1959, p. 4, quoted in comment under her picture.

¹⁶Symonds, *op. cit.*, p. 49.

¹⁷White, *Ed.*, p. 287.

Rules should be few and well considered; and when once made, they should be enforced. Whatever it is found impossible to change, the child learns to recognize and adapt itself to; but the possibility of indulgence induces desire, hope, and uncertainty, and the results are restlessness, irritability, and insubordination.¹⁸

Administer the rules of the home in wisdom and love, not with a rod of iron. Children will respond with willing obedience to the rule of love. Commend your children whenever you can. Make their lives as happy as possible. Provide them with innocent amusements. Make the home a Bethel, a holy, consecrated place. Keep the soil of the heart mellow by the manifestation of love and affection, thus preparing it for the seed of truth. Remember that the Lord gives the earth not only clouds and rain, but the beautiful, smiling sunshine, causing the seed to germinate and the blossom to appear. Remember that children need not only reproof and correction, but encouragement and commendation, the pleasant sunshine of kind words.¹⁹

There is as much physical health in these quotations as there is moral worth. Not only will the child who is loved, and who is taught to obey, be healthier mentally and physically, but in case of illness the child who is used to doing what he is told is manageable by doctors and nurses, and it can be a matter of life and death, how well the child cooperates with medications and treatments.

Denigrating discipline. Good discipline is a mixture of love and security. There are two extremes from this--each with results of its own. One extreme is overindulgence, the other is too much severity. Of the oversevere type, Mrs. White says:

There are many families of children who appear to be well trained, while under the training discipline; but when the system which has

¹⁸Ibid., p. 290.

¹⁹Ellen G. White, Counsels to Teachers, Parents and Students, p. 114. (Hereinafter referred to as CT.)

held them to set rules is broken up, they seem to be incapable of thinking, acting, or deciding for themselves. These children have been so long under iron rule, not allowed to think and act for themselves in those things in which it was highly proper that they should, that they have no confidence in themselves to move out upon their own judgment, having an opinion of their own. And when they go out from their parents to act for themselves, they are easily led by others' judgment in the wrong direction. They have not stability of character. They have not been thrown upon their own judgment as fast and as far as practicable, and therefore their minds have not been properly developed and strengthened.²⁰

The first adjustments that a child uses are rather spontaneous and trial-and-error, but they become refined and effective as he gains experience. The degree to which a person is able to use intelligent adjustments determines, to a large extent, his mental health, and in turn carries over into the physical. The dominated child begins his independent life with many counts against him. Dominerring parents arouse aggressiveness or they encourage submissiveness in their child. If aggressiveness, the child has no precedent in his experience to direct his aggressiveness, and where it will lead him will depend upon what influences he encounters. If the child reacts to his home discipline with submissiveness, he meekly accepts whatever life has to offer without resistance.

Parents who . . . can tolerate no form of boisterousness or initiative are placing definite handicaps on the development of their children. These children in later years may find that these strong repressions which they have assimilated may be met with equally strong desires, and the impact of them may give rise to serious conflicts and possible neurosis. Mental health requires a balance between control and freedom, and wise parents will be careful to avoid extremes in either of these directions. Children need firmness within reason, and yet parents should

²⁰White, *II*, pp. 132-33.

not be extreme in the degree to which they suppress their children's spontaneous activity.²¹

Overindulgent discipline. The opposite of severe discipline is that which is too lax, too indulgent. The results, while different, are no less undesirable.

There is no greater curse upon households than to allow the youth to have their own way. When parents regard every wish of their children, and indulge them in what they know is not for their good, the children soon lose all respect for their parents, all regard for the authority of God or man, and are led captive at the will of Satan. The influence of an ill-regulated family is wide-spread, and disastrous to all society. It accumulates in a tide of evil that affects families, communities, and governments.²²

A parent who does not exercise firmness and control is not only failing to induct his children into culture in which they are expected to take their place, but also may be permitting the growth of dangerous conflicts--giving children too much freedom leaves them at the mercy of their own harsh strivings.²³

The following case study illustrates the results of indulgence:

Jimmy Allen, an only child of eight years, is brought to the psychological clinic by his parents at the insistence of his teachers. The parents are much incensed and regard all this as a direct insult to the family. They raise a thousand complaints against the school and are completely at a loss to understand the situation. Jimmy, they tell us, is a delightful child at home. He has his moments now and then, but on the whole he is Mother's and Daddy's darling, the center of a comfortable suburban home. Jimmy plays with a group of younger children whom he completely dominates much to the delight of his father. His slightest wish is his parents' command. His manners are delightful with adults and he speaks like a polished young gentleman. With the adults at the clinic, he is calm, poised and helpful, too helpful for a child of eight. The parents feel the school must be a very terrible place for they point out that Jimmy just hates to go

²¹Symonds, *op. cit.*, p. 203.

²²White, *FP*, p. 579.

²³Symonds, *op. cit.*, p. 202.

there and cries and begs to stay home. He has even made himself sick over it and had to stay home because he got so upset.

The report from the school on Jimmy presents a vastly different picture. His teachers complain that he is "not bright," stubborn, and a "very nasty child." He does not get along well with the other children, beats up the younger ones, and buys off the older ones with lollipops and licorice shoestrings from the store across the street. In class he is constantly talking and showing off. He must always be the center of attention. He likes art work and this is the only thing he does well. Whenever his work is displayed, he brags insufferably. He has been known to cheat on exams. When he lost the lead in the play recently, he skipped school for three days in a row. With forty children in class, the teacher is at wits' end to know what to do with him.²⁴

This child is completely at a loss when it comes to adjusting outside the home. He knows no other role than to be the center of attraction. He is already setting up conditioning for an ailment adjustment later in life, by taking refuge in illness when he cannot tolerate a situation.

Rejection and discrimination. Rejection and discrimination amount to about the same thing to the child. A child can be partially or totally rejected, or he may be the victim of partiality unfavorable to him. If the partiality is to his advantage, it places him in the class with the overindulged child, but if unfavorable, he is, to that extent, rejected. Every basic need of such children is violated, those needs for love, security, acceptance, and self-worth. Such an experience disqualifies him for satisfactory religious exercises, for he cannot understand God who supplies love and care, when his environment

²⁴Snygg and Combs, *op. cit.*, pp. 58-59.

has never demonstrated such to him. Some of these persons seem able to rise above the circumstances of their experience and find compensations, while others are grossly maladjusted.

. . . loved and loving facilitates adjustment to situations that involve strong unpleasant emotions. When a loved child fails at something, the failure does not cut so deep as to make him doubt his basic worth because he is still secure in that love relationship. Consequently he is more easily reassured and encouraged to try again. In contrast, the unloved child who fails is in double jeopardy. To his insecurity is added the feeling of inadequacy, and the world looks blacker and blacker. When a loved child is frightened, he can literally or figuratively take the hand of the person who loves him, approach and examine the terrifying situation, learn its true dimensions, and more readily find the courage to face it. But terror to the unloved child is unfaceable and overwhelming. Punishments, penalties, and the demands of authority are bearable for loved children because they do not imply rejection or fundamental lack of worth. Consequently they are analyzable by the loved child, who more easily can perceive their meaning and take them in stride. But to the unloved child these things may be taken as indicators of personal rejection or of unfavorable status. Resentment, rebellion against authority, hostility against peers who seem more favored, or fundamental doubts of own worth ensue.²⁵

In the author's experience with student nurses were two who vividly illustrate the results of the mind on the body resulting from rejection. These two girls were of about the same age. One was from a happy, secure home, the other, an illegitimate child, was reared in an orphan's home. She had been tried out in six or seven foster homes, each time to be returned to the orphan's home. Much to her credit, she has made every effort to compensate. Her nurses' education represented this. She was eager to do all that she was supposed to do, and her

²⁵Daniel A. Prescott, "Role of Love in Human Development," p. 5. (Unpublished manuscript.)

hunger for friendship was pitiful, but to those who befriended her, she clung with more than acceptable tenacity. One contrast between these girls was in the way they responded to illness. The girl from the adequate home, while often ill with minor ailments, always recovered promptly and was back on duty even before she felt very well. The rejected girl took a long time to recover from the slightest illness. She was in bed with pain, fever, nausea and vomiting for more than a week after the extraction of an impacted wisdom tooth. The other girl would have been on duty the next day. This extended illness was not malingering, but the physical expression of an unmet emotional need.

Inconsistent discipline. Another kind of discipline that tends to maladjustment is inconsistent discipline. The child is confused. The discipline is severe one day and indulgent the next. The parent may correct in anger. "To manifest passion toward an erring child is to increase the evil. It arouses the worst passions of the child and leads him to feel that you do not care for him."²⁶ How can such a child develop habits of logical, straight thinking? He is certainly a candidate for later maladjustment and neurosis.

The atmosphere of the home. Discipline does not restrict itself to measures used to meet crises or to the punishment of disobedience. Much more of it is indirect, the result of the atmosphere that pervades the home, the atmosphere that makes the home a happy place or an

²⁶Ellen G. White, Child Guidance, p. 245.

unhappy one. It embodies forces and coherence that hold parents and children in relationship. It includes attitudes and responses, give and take, in a constant form of latent control. Each child feels it from the earliest infancy through adolescence. It is this power that shapes the personality. Good discipline that is constant and consistent produces good, healthy personalities. "Above all else let parents surround their children with an atmosphere of cheerfulness, courtesy, and love."²⁷ Discipline that has been too severe, has been interrupted or suffered tragedy, leaves its mark on the child concerned.

Among the clients who come to a counselor with personal problems a very considerable proportion are children of divorced parents. Sometime during their childhood, long before emotional growth was completed, they have been confronted with problems of conflicting loyalties that would have strained even the capacities of maturity. . . .

Children in these homes have had to learn to cope with bitterness, hatred, neglect, and confusion, and to put up some sort of defenses against the anxiety such attitudes bring.²⁸

IV. SCHOOL ENVIRONMENT

Another mistake of parents is to set too high standards of conduct and accomplishments for their children. "Parents may arouse aggressive trends in a child by the imposition of high standards of conduct and by requiring high levels of achievement."²⁹ Here the

²⁷Ibid., p. 146.

²⁸Leona E. Tyler, The Work of the Counselor, pp. 5-6.

²⁹Symonds, op. cit., p. 75.

superego³⁰ is involved, and the superego, thus trained, is conditioned for undesirable attitudes such as excessive drive, radicalism or compulsion, or at best, tension and anxiety. Mastering anxiety figures predominantly in emotional development. When a child begins school, he has many new restraints and new demands as well as new skills to learn. Certainly the good of the child would be furthered by allowing for the development of proper maturity to meet these demands before he must take them in such a large order in the schoolroom. "The violence with which children rush from school at the end of the day is testimony to the long hours of enforced restraint."³¹

We have pushed children into small muscle activities, straining ears, focusing the eyes and manipulating the fine muscles of the fingers, all of which tend to cause tension. These small muscles develop last. . . .

There are many indications to show us that if small muscle activities, even reading, writing and arithmetic, were postponed a few years, the child would pick them up quickly with much greater efficiency.³²

Long years before science made these discoveries, Mrs. White provided the counsel that children should not be sent to school too early.

Parents should be the only teachers of their children until they have reached eight or ten years of age. As fast as their

³⁰Superego is the psychological term that is practically equivalent to conscience. Ego represents the self as it interacts within its own confines to the external environment.

³¹Symonds, *op. cit.*, p. 75.

³²Jay B. Nash, *Teachable Moments*, pp. 189-90.

minds can comprehend it, the parents should open before them God's great book of nature. The mother should have less love for the artificial in her house, and in the preparation of her dress for display, and should find time to cultivate, in herself and in her children, a love for the beautiful buds and opening flowers. By calling the attention of her children to their different colors and variety of forms, she can make them acquainted with God.³³

V. COMPANIONSHIP

Outside the home, the companionship chosen by or for children wields a mighty influence. Home influences can never be obliterated, but they can be greatly weakened by associations outside the home. Not only the children, but adults are swayed by the companions they choose.

It is natural to seek companionship. Every one will find companions or make them. And just in proportion to the strength of the friendship, will be the amount of influence which friends will exert over one another for good or for evil. All will have associates, and will influence and be influenced in their turn.

The link is a mysterious one which binds human hearts together, so that the feelings, tastes, and principles of two individuals are closely blended. One catches the spirit, and copies the ways and acts, of the other. As wax retains the figure of the seal, so the mind retains the impression produced by intercourse and association. The influence may be unconscious, yet it is no less powerful.

If the youth could be persuaded to associate with the pure, the thoughtful, and the amiable, the effect would be most salutary. If choice is made of companions who fear the Lord, the influence will lead to truth, to duty, and to holiness. A truly Christian life is a power for good. But, on the other hand, those who associate with men and women of questionable morals, of bad principles and practices, will soon be walking in the same path.³⁴

³³Ellen G. White, Fundamentals of Christian Education, p. 21.
(Hereinafter referred to as FE.)

³⁴White, FE, p. 587.

VI. EMPLOYMENT AS ENVIRONMENT

The job does much to make individuals what they are. The companions met on the job, its requirements and satisfactions, all place their stamp on the worker. The attitudes of drudgery with which the work is performed have a great amount to do with mental hygiene. If a worker spends forty hours a week on the job, and carries with him many more hours of thought connected with it, many conversations highly predominating in shop talk, the job is no small item in happiness and satisfaction or in boredom and dissatisfaction. Overwork need not be a factor at all in a nervous breakdown. An unhappy, but necessary, job can certainly generate emotional problems difficult for one to handle. A teacher is being described in the following quotation, probably one who loves his work, but who still finds problems on the job.

So wearing are his responsibilities that special effort on his part is required to preserve vigor and freshness. Often he becomes heart-weary and brain-weary, with the almost irresistible tendency to depression, coldness, or irritability. It is his duty not merely to resist such moods, but to avoid their cause.³⁵

He who practices Solomon's advice, "Whatsoever thy hand findeth to do, do it with thy might,"³⁶ has a measure of remedy for problems presented by his job.

He who discerns the opportunities and privileges of his work will allow nothing to stand in the way of earnest endeavor for self-improvement. He will spare no pains to reach the highest standard of excellence.³⁷

³⁵White, Ed., p. 277.

³⁶Ecclesiastes 9:10. ³⁷White, Ed., p. 281.

VII. THE CULTURE AND MENTAL HYGIENE

How much mark our culture makes on us is hard to realize. One country, deficient in resources for its population, presents a predominance of nutritional diseases. Parasitical diseases are frequent in parts of the world, and working conditions also have their influence on the illnesses of an area. Perhaps no place on the earth or no time in the world's history has presented so many neuroses as there are at the present time in the materially prosperous United States. Modern living certainly makes demands upon the nervous system. There are other places in the world where work is hard, deprivations many, but where neuroses hardly exist.

Several years ago Margaret Mead visited various uncivilized tribes in different places in the world in order to study their culture. In the Samoan Islands she discovered that girls do not have the violent adolescent problems that American girls have. The babies are nursed until they are three or four years old, and then are turned over to the next older child. He teaches the child from then on. Precocious children are held back and slow children are given extra opportunity, so that there is an evenness of development. Girls are taught to regard boys as present enemies and future lovers. Marriage is a matter of social and economic convenience and divorce is easy to obtain. Morals are somewhat lax.

In New Guinea there were two tribes of very opposite characteristics. The Arapesh she found to be a mild, trusting, affectionate

people. Competition and aggressiveness were absent. Even the children's games were not competitive, and if children quarreled they were separated. The Nundugumor tribe was quite different. They were warlike and cannibalistic. They do not welcome the birth of a child, it receives no extra attention and no love while nursing, and is pushed away as soon as it finishes. Weaning is done early, and the child gets cross words and blows.³⁸ These are certainly realistic examples of environment and effect.

VIII. OLD AGE AND ENVIRONMENT

When planning for old age, people usually think of economic security, and plans are guided to this end. Some attention, but not enough, is given to meeting the emotional needs at an age when the personal resources are depleted. Some geriatric³⁹ emphasis has been given to adding life to years as well as adding years to life.

I was shown David entreating the Lord not to forsake him when he should be old, and what it was that called forth his earnest prayer. He saw that most of the aged around him were unhappy, and that unhappy traits of character increased especially with age. If persons were naturally close and covetous, they were most disagreeably so in their old age. If they were jealous, fretful, and impatient, they were especially so when aged. . . .

David was deeply moved; he was distressed, as he looked forward to the time when he should be aged. He feared that God would leave him and that he would be as unhappy as other aged persons whose course he had noticed, and would be left to the reproach

³⁸Stewart Henderson Britt, Social Psychology of Modern Life, pp. 52-57.

³⁹Geriatrics refers to the medical care of the aged.

of the enemies of the Lord. With this burden upon him he earnestly prays, "Cast me not off in the time of old age; forsake me not when my strength faileth."⁴⁰

IX. CONCLUSION

From prenatal life to the grave environment, with a prevailing mental hygiene aspect, the life is molded and the health and happiness are affected. Patterns of reaction and behavior are more firmly fixed as time advances. The home sets up the first models by means of its attitudes and discipline. Early, too, the child's associates begin to contribute. The school is an important part of any child's health. The early attendance at school adds tensions and frustrations, predisposing to later maladjustment.

The culture in which one lives helps greatly to shape the individual's mental health. Religion, education, companionship, and employment are all related to personality. These help to provide problems as well as satisfactions. Even in old age the environment is still important to the emotional health, and to mind and body relations.⁴¹

⁴⁰White, *IX*, pp. 422-23. The Scripture is Psalms 71:9.

⁴¹See Appendix A for material relevant to this chapter.

CHAPTER VI

CONSTITUTIONAL MAKE-UP AS A FACTOR IN MIND-BODY RELATIONSHIPS

The relation between heredity and environment has furnished some interesting study. The question of which has the most to do with the individual becomes difficult to answer. Nevertheless, the fact remains that both make their contributions and both are to be reckoned with in the study of human beings.

I. HEREDITY AS A CONSTITUTIONAL CONTRIBUTOR

There is much in psychological literature on the influence of heredity and environment on physical development, personality, and even character. The actual physical body is, of course, hereditary. The newborn infants in a nursery amply testify not only to different physical make-up, but to temperamental differences as well. One baby will be placid, always asleep, while another will be easily awakened and difficult to pacify. Temperament has its source in the nervous system, and it will be acted upon by environment as the baby grows.

When God made man a free moral agent, He made it possible for him to acquire characteristics through learning. Some of this learning becomes subject to his free choice, some of it is provided by the environment, and even the environment can to quite an extent be manipulated by the individual. Sin and temptation introduced the law of death with its sorrow, anxiety, and frustrations. The delicate balance between the sympathetic and parasympathetic nerves was upset by the

sorrow, anxiety, and guilt that sin wrought. In this way physical degeneracy became a part of human heritage.

The book of Genesis gives quite a definite account of social and individual life, and yet we have no record of an infant being born blind, deaf, crippled, deformed, or imbecile. There is not an instance upon record of a natural death in infancy, childhood, or early manhood. There is no account of men and women dying of disease. Obituary notices in the book of Genesis run thus: "And all the days that Adam lived were nine hundred and thirty years; and he died." "And all the days of Seth were nine hundred and twelve years; and he died." Concerning others, the record states: He lived to a good old age; and he died. It was so rare for a son to die before the father that such an occurrence was considered worthy of record: "And Haran died before his father, Terah." Haran was a father of children before his death.

God endowed man with so great vital force that he has withstood the accumulation of disease brought upon the race in consequence of perverted habits, and has continued for six thousand years. This fact of itself is enough to evidence to us the strength and electrical energy that God gave to man at his creation. It took more than two thousand years of crime and indulgence of base passions to bring bodily disease upon the race to any great extent. If Adam, at his creation, had not been endowed with twenty times as much vital force as men now have, the race, with their present habits of living in violation of natural law, would have become extinct.¹

II. DISEASE AND HEREDITY

Actual hereditary disease, as such, is restricted by several factors. For one thing it is likely to be recessive, and for another, the genes and chromosomes must be involved, and this factor is well provided for by the Creator in making them almost inaccessible. Prenatal disease is another thing. In such cases something happens during the prenatal period of development, and as the chromosomes with their

¹White, 3T. pp. 138-39.

genes have already made their contribution to the individual, such conditions are not passed on. They can only assume the same status as postnatal incidents.

Characteristics which cause the most concern are very often believed to be due to recessive genes (genes carrying latent traits which do not necessarily show up but which can be transmitted). Some feeble-mindedness, certain forms of insanity and a susceptibility to certain diseases, such as diabetes, are frequently listed among traits which can be inherited through a combination of recessive genes. According to this theory of inheritance, a recessive trait cannot be passed on if it is present in the genes of only one parent. It must be carried by both parents; moreover, the genes carrying a trait must be paired.²

Erythroblastosis, an infant anemia, is caused in a special way not understood until the last twenty years or so. The mother has an RH negative blood, and her fetus, RH positive blood. The fetal blood is incompatible with the mother's blood, and she manufactures antibodies against it. Then these antibodies, in turn, destroy the red blood cells of the fetus. Unless the disease becomes too advanced before birth, it can be successfully treated with a complete replacement of infant blood by means of transfusions.

Since blood types are hereditary, this disease is necessarily hereditary in this sense. In another sense the disease is prenatal. Only the infant's blood type can be passed on to the next generation, and it has the same potentialities as the blood type of any other individual.

Another hereditary disease is hemophilia. In this case the

²Bess V. Cunningham, Psychology for Nurses, p. 56.

causative factor is attached to the X chromosome. When a male child receives this X chromosome from his mother, he becomes a bleeder or hemophilic. Since the mother has two X chromosomes, not every one of her male children needs to develop hemophilia. A female child may receive this chromosome, but she does not suffer from its presence. It becomes causative only when passed on to her male offspring.³

Syphilis was at one time considered in three categories: acquired, congenital, and hereditary. These three classifications are given in the older books; the newer ones either do not mention hereditary syphilis, or call it hereditary syphilis when a congenital syphilis is late in developing.⁴

"Constitutional differences such as vigor or weakness and susceptibility or immunity to various diseases are often listed among hereditary traits."⁵ And here are to be found the most frequent hereditary manifestations. It is this constitutional heredity that figures in psychosomatic possibilities. Of course, constitutional elements enter into other diseases, and they are more evident in some psychosomatic patients than others.

³Females have two X chromosomes and males an X chromosome and a Y chromosome. If a child receives an X chromosome from the father, a female child results. If a child receives an X chromosome from the mother and a Y chromosome from the father, a male child develops.

⁴John Stokes, M.D., Dermatology and Syphilology for Nurses, 1936, recognizes what was then called third-generation or hereditary syphilis. Frank Hinman, M.D., Principles and Practice of Urology, 1935, also recognizes hereditary syphilis. Russell L. Cecil, M.D., et al., A Textbook of Medicine, 1947, does not mention hereditary syphilis. Merck Manual, 1950, does not mention it. Dorland's Illustrated Medical Dictionary, 1958, calls late-appearing congenital syphilis, hereditary syphilis.

⁵Cunningham, op. cit., p. 56.

This constitutional background is seen in Dr. Edward Podolsky's description of the heredity equipment of the kind of individual who succumbs to gastric or duodenal ulcer. Such persons, he says, have a definite and clear-cut type of personality. They are extremely conscientious, and they set high standards for themselves and attempt to reach goals in an obsessive and compulsive way, goals which most people would not attempt. They are intelligent, overactive, independent, and they are tense. He describes them as having a good sense of humor, and they have swift and strong reactions.⁶

III. THE NERVOUS SYSTEM AND HEREDITY

Dr. Walter C. Alvarez writes much that is valuable in understanding the nervous background for disease. He admits his own poor nervous heredity, and this gives him a sympathetic approach.

There is a group of persons whom I often think of as having come to the end of their rope nervously. Usually the patient is a young woman who, with a poor nervous heredity and some constitutional inadequacy to begin with, managed somehow to keep going for years in spite perhaps of having to work her way through school, then to work long hours, then to do much for a lot of unreasonable and demanding relatives, then to go through the sorrow of a broken engagement or an unfortunate marriage, then through much illness, and finally an operation or two. To me the wonder is not why such a woman broke down, but how she kept going as long as she did.⁷

Stagner well describes the part played by heredity and the nervous system.

⁶Edward Podolsky, M.D. "The Ulcer Personality," Nursing World, August, 1950, pp. 362-63.

⁷Walter C. Alvarez, M.D., Nervousness, Indigestion and Pain, p. 250.

The autonomic nervous system is a significant factor in determining individual differences in personality and in influencing developmental sequence in a given individual. Various studies have shown that differences in arousal, duration, and control of autonomic activity differ from person to person as regards ease of setting off changes in the blood pressure, psychogalvanic reflex, pulse rate, and so on; in the length of time required for these functions to return to normal; and in the extent of control of visceral functions. A good deal of evidence supports the view that these variables are related to personality traits in adults. There is also some reason to believe that the development of the young child is influenced by these characteristics of the autonomic nervous system; e.g., a child with a highly reactive autonomic will probably acquire conditioned emotions more readily and thus will develop attitudes and expectancies rather different from his brother, whose viscera are less sensitive.⁸

Dr. Alvarez gives a classic illustration of how highly sensitive the nervous system can be:

I said one day to an attractive but frail and hypersensitive little violinist, "What does a symphony concert do to you?" and, as I expected, she said, "It takes me into the seventh heaven, but it tears me all to pieces emotionally, and I come home a wreck." But she agreed with me that it was better to be that way than stupid and insensitive.⁹

Then he goes on to explain the mechanism that produces such sensitivity:

I point out to the hypersensitive woman that she must suffer, if only because she is so sensitive; sounds, smells, light, a draft, the ticking of a clock, things which are not bothersome to the ordinary person, beat in on her brain and wear her out. . . .

One can find much about this painfulness of visual, auditory and olfactory stimuli in the biographies of poets, musicians, writers and other gifted, hypersensitive neurotic persons.¹⁰

⁸Ross Stagner, Psychology of Personality, p. 92.

⁹Alvarez, op. cit., p. 130.

¹⁰Ibid., p. 60.

Another difficulty often met with by the hypersensitive woman is that she becomes unpleasantly conscious of the workings of her organs which she never knew she had before. Thus, while recovering from a postinfluenzal depression, she may feel her heart beating, or she may be annoyed by the throbbing of her carotid artery where it passes near the inner ear, or she may feel the writhing movements of her intestine, or the contractions of the little muscles of her skin. The mere effort of putting up with such sensations and not getting alarmed over them adds to the sum of the day's fatigue.¹¹

These quotations should make it clear that there is a vast difference in the nervous systems of different individuals. What will be hardly noticeable to one person may be the source of much annoyance and discomfort to another. The sensitive person is going to be subject, far more often, to psychosomatic ailments, than the insensitive individual. Also, the same person differs at different times in degree of sensitivity, due to various reasons.

IV. NERVOUS INSTABILITY IN THE ANIMAL KINGDOM

Nervous instability appears as a hereditary trait in the animal kingdom as well as in the human family. A flock of highbred Leghorn hens will go into a stampede if the housewife comes to their pen wearing an apron when they are used to seeing her without one. Herds of registered Jersey cows are susceptible to windy, disagreeable weather, which will slow up their milk production. Professor Lloyd Morgan tells of a litter of five pups that he took for a walk. They came to a gate with bars so close together that the pups could not get through. All

¹¹Ibid., pp. 130-31.

the little dogs struggled to get through at the bottom, but failed. Eventually three of them discovered that they could get through the bars higher up. One other pup continued to struggle, but the fifth one gave up and lay down whining. This interesting experiment he repeated several times, always with the same results. These little fellows were each born with a different equipment.¹²

V. CONCLUSION

The work of physical degeneration commenced in Eden is still progressing. Heredity produces a widespread variety of traits. There are a few diseases that are inherited, but mostly constitutional inheritance accounts for the type of disease to which an individual is susceptible. Certain constitutions are more sensitive to psychosomatic disease than others. Even among animals, who have no reasoning powers, and who know nothing of their physical make-up, there is evidence that they have different nervous systems.

¹²Eric S. Waterhouse, An A B C of Psychology for Religious Education, p. 102, citing the incident but giving no reference.

CHAPTER VII

RIGHT THINKING

Basic to good mind and body relations is right thinking. The wrong thinking that began under the tree of knowledge of good and evil sprang from Satan's appeal to self-exaltation: "Ye shall be as gods." This attitude has brought ruin to him and his angels, and what ruin it has wrought to the human family! The very fact that self-preservation holds such high importance in human welfare makes it easy to place upon self a disproportionate amount of thought and attention.

I. THE PHENOMENAL FIELD

The real situation in mind-caused diseases is not, "She thinks she is sick," but that her thoughts have made her sick. Dr. Alvarez in his book, Nervousness, Indigestion and Pain, mentions "years of wrong thinking." He refers to the fussbudget, the worrier, the perfectionist. Each of these has made for himself an atmosphere in which he lives. Every person has what is called a "phenomenal field." This phenomenal field represents the world of thought, a personal universe filled with ideas of the past, present, and future, and the individual's self-assigned relation to this realm of intellectual activity.

II. WHAT IS WRONG WITH THE THINKING?

Many are diseased physically, mentally, and morally, because their attention is turned exclusively to themselves.¹

¹White, 2T, p. 647.

That which brings sickness of body and mind to nearly all, is dissatisfied feelings and discontented repinings. They have not God, they have not the hope which reaches to that within the veil, which is an anchor to the soul both sure and steadfast. All who possess this hope will purify themselves even as he is pure. Such are free from restless longings, repinings, and discontent; they are not continually looking for evil and brooding over borrowed trouble.²

If the phenomenal field is filled with self, with the unhappy things that occur, with slights and failures of life, with fears and anxieties, with tension and worry and resentment, the thoughts are wrong.

III. SOURCES OF RIGHT THOUGHTS

A good model for right thinking is given by the Apostle Paul:

Finally, brethren, whatsoever things are true, whatsoever things are honest, whatsoever things are just, whatsoever things are pure, whatsoever things are lovely, whatsoever things are of good report; if there be any virtue, and if there be any praise, think on these things.³

There is a science of Christianity to be mastered,—a science as much deeper, broader, higher than any human science as the heavens are higher than the earth. The mind is to be disciplined, educated, trained; for we are to do service for God in ways that are not in harmony with inborn inclination. Hereditary and cultivated tendencies to evil must be overcome. Often the education and training of a lifetime must be discarded, that one may become a learner in the school of Christ. Our hearts must be educated to become steadfast in God. We are to form habits of thought that will enable us to resist temptation. We must learn to look upward. The principles of the word of God,—principles that are as high as heaven, and that compass eternity,—we are to understand in their bearing upon our daily life. Every act, every word, every thought, is to be in accord with these principles. All must be brought into harmony with, and subject to, Christ.⁴

²Ibid., p. 566. ³Philippians 4:8.

⁴White, *M.H.* pp. 453-54. (Italics supplied.)

Even when performing one's daily toil the mind may be occupied with profitable thinking.

So in every line of useful labor and every association of life, He desires us to find a lesson of divine truth. Then our daily toil will no longer absorb our attention and lead us to forget God; it will continually remind us of our Creator and Redeemer. The thought of God will run like a thread of gold through all our homely cares and occupations.⁵

IV. WHAT CAN BE DONE ABOUT WRONG THINKING?

With such high ideals of right thinking, how can they be reached? Surely there is no self-seeking, no repining, no anxiety portrayed here. To reach such ideals no doubt involves a long and gradual growth, and much effort. In handling our problems, we so often try to make self-justification cover guilt and make compromise stand for victory. The result is only continued tension, when the mind needs the peace that comes from complete surrender, the same assurance that Christ gave when He added forgiveness of sin to His miracles of healing. There are things that should be forever settled, for as long as they are left dangling there will be tension. Neither should they be repressed. They need to be completely cleared up. Right thinking should set the mental house in order and keep it so.

V. AIDS IN DIRECTING THE THINKING

Childhood is the time to form habits of happy thinking, and children can be directed into channels of happy thought. One mother,

⁵Ellen G. White, Christ's Object Lessons, pp. 26-27. (Hereinafter referred to as COL.)

with a child who habitually awakened from his nap crying, determined to make a happier child out of him. She gave special attention to this child until the habit was broken. When he began to stir from his nap, she was on hand at once to take him up. She soothed him and provided him with something to divert his attention, and in due time she was repaid with a happy child.

A change of thought habits can also be initiated in adults. Decisions can be made and helps set up to check bad thought activities and to encourage good ones. Some of these could be:

1. Supply the mind with good thought material from reading and from listening to what is good. The mind needs many resources.

2. Associate with people who are models in the thought area to be improved.

3. Refuse to mull over slights, personal injuries, worries, or whatever might be distressing. This can be accomplished by having selected ahead of time some topic for thought to which the mind can be instantly switched. Live over a lovely trip, recall a pleasant visit, repeat poetry or Scripture. "It is a positive duty to resist melancholy, discontented thoughts and feelings,--as much a duty as it is to pray."⁶

4. Keep undesirable topics out of the conversation. "Expression deepens impression," as is very well known.

⁶White, MM, p. 251.

5. Seek new interests that will provide new subject matter for thought.

6. The outdoors is invigorating, fresh air is restorative, and nature is inspirational. So complete a change of atmosphere suggests new forms of thought. "Exercise in the open air should be prescribed as a life-giving necessity."⁷ This instruction can rightly be expanded to include both mind and body in its application.

7. Finding ways to serve is certainly one way of redirecting thought.

The fifty-eighth chapter of Isaiah is a prescription for maladies of the body and of the soul. If we desire health and the true joy of life, we must put into practise the rules given in this scripture. Of the service acceptable to Him, and its blessings, the Lord says:

"Is it not to deal thy bread to the hungry,
And that thou bring the poor that are cast out to thy house?
When thou seest the naked that thou cover him,..."⁸

8. "Song is a weapon that we can always use against discouragement. As we thus open the heart to the sunlight of the Saviour's presence, we shall have health and His blessing."⁹ Be the musician amateur or professional, a piano is a good place to work out emotions. If the music is rightly selected, the player can come away with new impulses and fresh courage. "Nothing tends more to promote health of body and of soul than does a spirit of gratitude and praise."¹⁰

⁷Ibid., p. 265.

⁸Ibid., p. 256. The Scripture is Isaiah 58:7.

⁹Ibid., p. 254. ¹⁰Ibid., p. 251.

9. The mind needs beauty. "The king's daughter is all glorious within."¹¹ She has chosen the best subjects for her thoughts. She has brought herself under the influence of God's grace.

In the matchless gift of His Son, God has encircled the whole world with an atmosphere of grace as real as the air which circulates around the globe. All who choose to breathe this life-giving atmosphere will live, and grow up to the stature of men and women in Christ Jesus.¹²

Rollo May says that "living creatively means growing, expressing one's potentialities, developing one's possibilities, and therefore finding continuously new interests in persons and things."¹³

VI. CONCLUSION

If the phenomenal field is filled with self, it will mean selfishness, discontent, depression, pessimism, fears, inadequacy, worry, anxiety, envy, emulation, and strife. When the hungry are fed, the naked clothed, and the outcast taken in, the thinking takes on the right color. Right thinking finds heights of nobility and inspiration of purpose when it contemplates heavenly holiness centered in Christ. Effort in the right direction will lead to this goal. Much can be done to eliminate from the mind thoughts that are a hindrance to healthful living, and to learn the art of thinking such thoughts as will result in happiness and effective living.

¹¹Psalms 45:13.

¹²Ellen G. White, Steps to Christ, p. 72. (Hereinafter referred to as SC.)

¹³Rollo May, Springs of Creative Living, p. 18.

CHAPTER VIII

MIND RELATIONS, RIGHT AND WRONG

Influences that act upon the mind run into quite a list, beginning with those rudimental responsibilities of parents and reaching a climax in Communistic brainwashing.

I. CONSCIENCE TRAINING

The development of the mind begins early, before there is any individual moral responsibility. The parents provide the material that builds itself into what has long been known as conscience, and what psychiatrists now call superego. The superego may be modified by later experience, but the original will always retain much of its validity. The child first learns restrictions. He must not touch the hot stove, he must not put certain things into his mouth, he must keep out of this and that. Quite largely the superego is negative. As intelligence increases, the child is able to take on more positive ideas, and the superego becomes modified by the ego ideal. The balance between these two has much to do with personality.

II. INFLUENCE

Another outside source of mental activity is influence. Every person is a part of those with whom he has associated. Moral responsibility applies to influence, for the choice of associates is largely voluntary.

Mental control ascends a scale of intensity in suggestion, pressure, dominance, and propaganda before it reaches its climax in the forms of hypnotism and brainwashing. Universally all of these forces are becoming more intense and more subtle.

III. MASS MEDIA

There is a constant bombardment of the senses coming from radio, television, the printed page, and outdoor advertising.

A new factor has been added in human life so radical in nature that the world can never be quite the same again: it has been called the revolution in communication. . . . The great danger of this lies in the commercial test of all our values. The truth sometimes becomes subservient to sales promotion, and the methods used appeal to the least common denominator emotions of sex, success, and popularity. Therefore, the indirect product of this barrage of persuasion is to develop a moral atmosphere that places glamour ahead of integrity and sales results ahead of truth. The extent of over claims for products in press, radio, and television has become so notorious that it is even the jest of children. Nevertheless, advertisers continue to make surveys that they say prove their effectiveness. Either the advertisers are vastly overrating their service or they are providing a kind of persuasion that jeopardizes the basic values for which we struggle as Christians.¹

The suggestions so used are well studied and extremely indirect. Many of the appeals are unconscious and subliminal, yet they register in the mind and affect opinions.

IV. DOMINATION

Domination is a form of mind control, in perhaps a lesser degree than hypnotism and brainwashing. It exists in governments, and it is

¹Albert Terrill Rasmussen, Christian Social Ethics. p. 33.

a part of the program of some churches. Domination formed the framework of the persecutions of the Dark Ages. Domination has been counteracted in the republican form of government. Progress and enlightenment have followed, for relief from domination releases initiative. But domination may still exist in the hearts of those who think they love freedom. Teachers may employ domination, and in many homes there is an autocratic form of discipline. If the control of one mind by another is wrong, then domination is wrong even when employed with children.

To direct the child's development without hindering it by undue control should be the study of both parent and teacher. Too much management is as bad as too little. The effort to "break the will" of a child is a terrible mistake. Minds are constituted differently; while force may secure outward submission, the result with many children is a more determined rebellion of the heart. Even should the parent or teacher succeed in gaining the control he seeks, the outcome may be no less harmful to the child. The discipline of a human being who has reached the years of intelligence should differ from the training of a dumb animal. The beast is taught only submission to its master. For the beast, the master is mind, judgment, and will. This method, sometimes employed in the training of children, makes them little more than automatons. Mind, will, conscience, are under the control of another. It is not God's purpose that any mind should be thus dominated. Those who weaken or destroy individuality assume a responsibility that can result only in evil. While under authority, the children may appear like well-drilled soldiers; but when the control ceases, the character will be found to lack strength and steadfastness. Having never learned to govern himself, the youth recognizes no restraint except the requirements of parents or teacher. This removed, he knows not how to use his liberty, and often gives himself up to indulgence that proves his ruin.²

²White, Ed., p. 288.

V. DRUGS AND THE MIND

Many medications act on the brain and nervous system. A surprisingly large section of pharmacology is taken up with drugs that affect the nervous system in various ways. If the heart rate is too rapid, a drug is given which acts on its nervous mechanism to slow it down; if the optometrist wishes to dilate the pupils for eye examination, he uses a drug which acts on the nerves that regulate the size of the pupils. If it seems desirable to reduce stomach secretion and motility, as in gastric ulcer, drugs are used which depress the parasympathetic nerves, for these two functions are stimulated by the parasympathetics. If pain must be controlled, the drugs used are those which act on the sensory nerves. Even hydrotherapy and some other forms of physical therapy depend, for their results, upon nerve action. Heat dilates the blood vessels and increases the circulation to the part. Cold contracts the blood vessels, but the blood vessels dilate and contract through the action of the autonomic nerves. There are various reflex areas that are used in hydrotherapy to gain certain results. These areas are reflex because of their nerve distribution.³

The line of demarkation between what is legitimate and what is harmful in drugs is easily confused. Dr. Meerloo writes a very profitable and interesting book called Rape of the Mind. He is a Dutch psychiatrist, and as a prisoner of war, came in contact with mind control.

³See Figures 2-5, pp. 71-74. For explanation of the figures, see Appendix B.

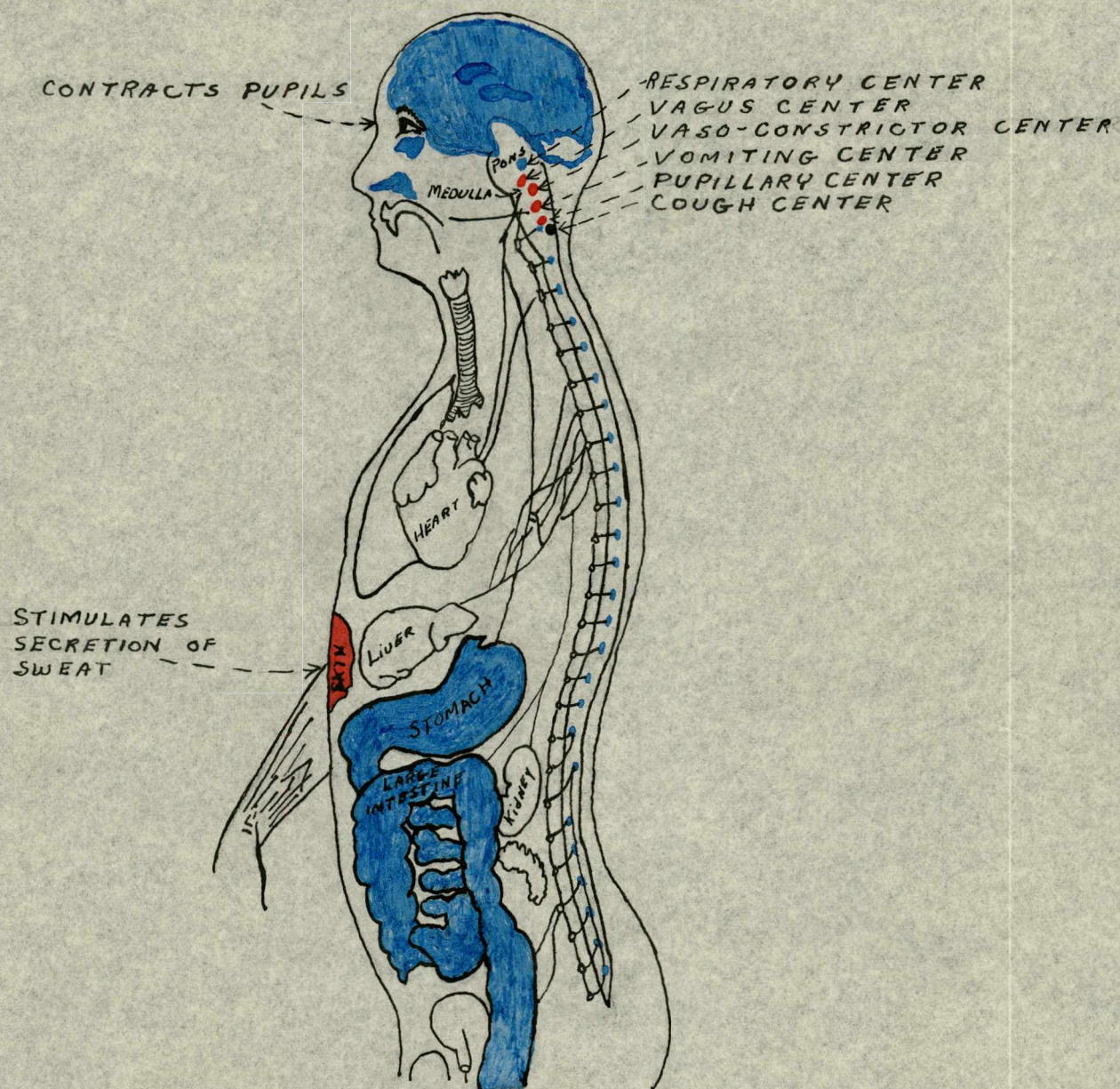


FIGURE 2.
FIGURE ILLUSTRATING THE EFFECTS OF MORPHINE
(Code) Red: Stimulation
Blue: Depression

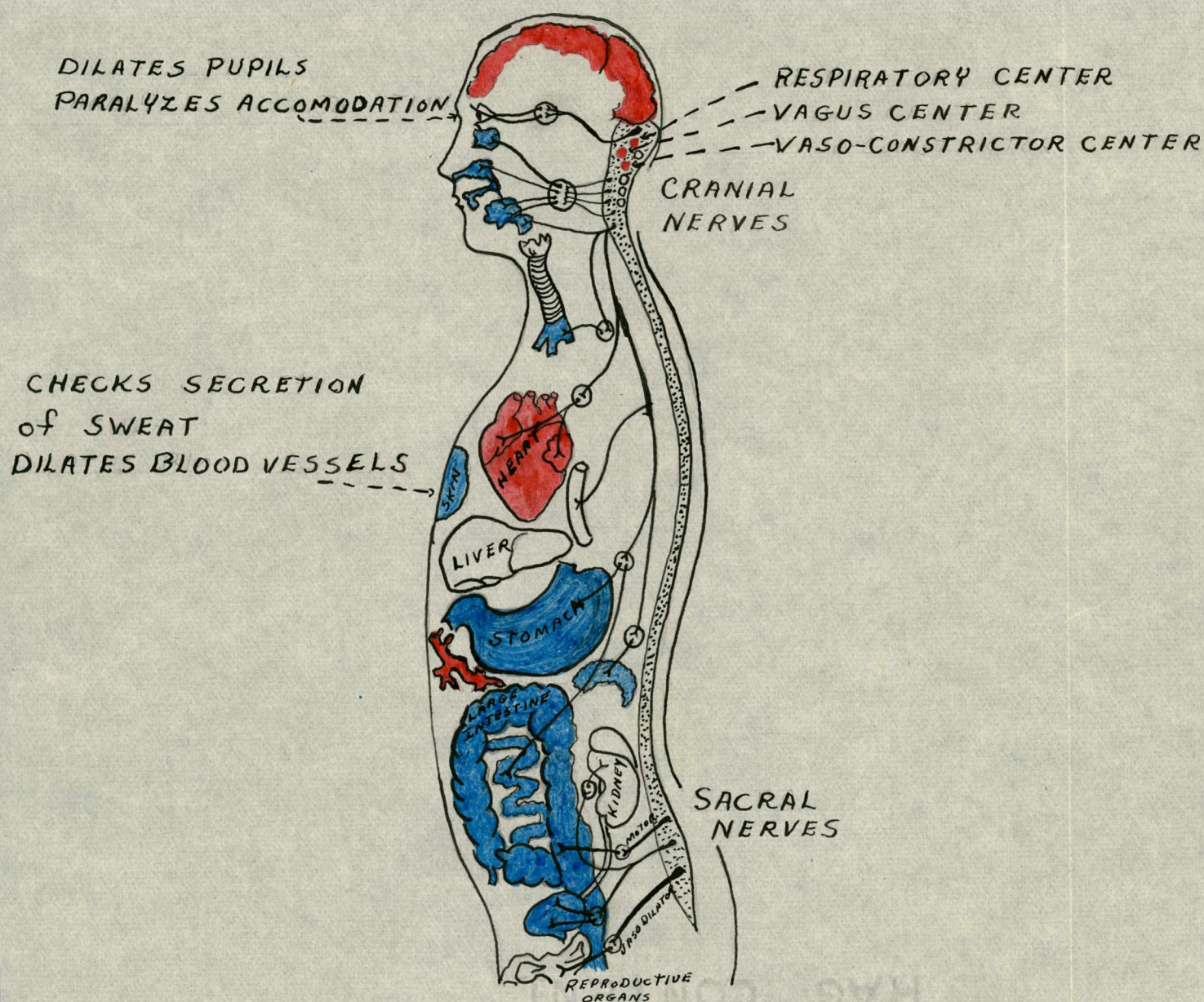


FIGURE 3.
FIGURE Illustrating the Effects of Atropine
(Code) Red: Stimulation
Blue: Depression

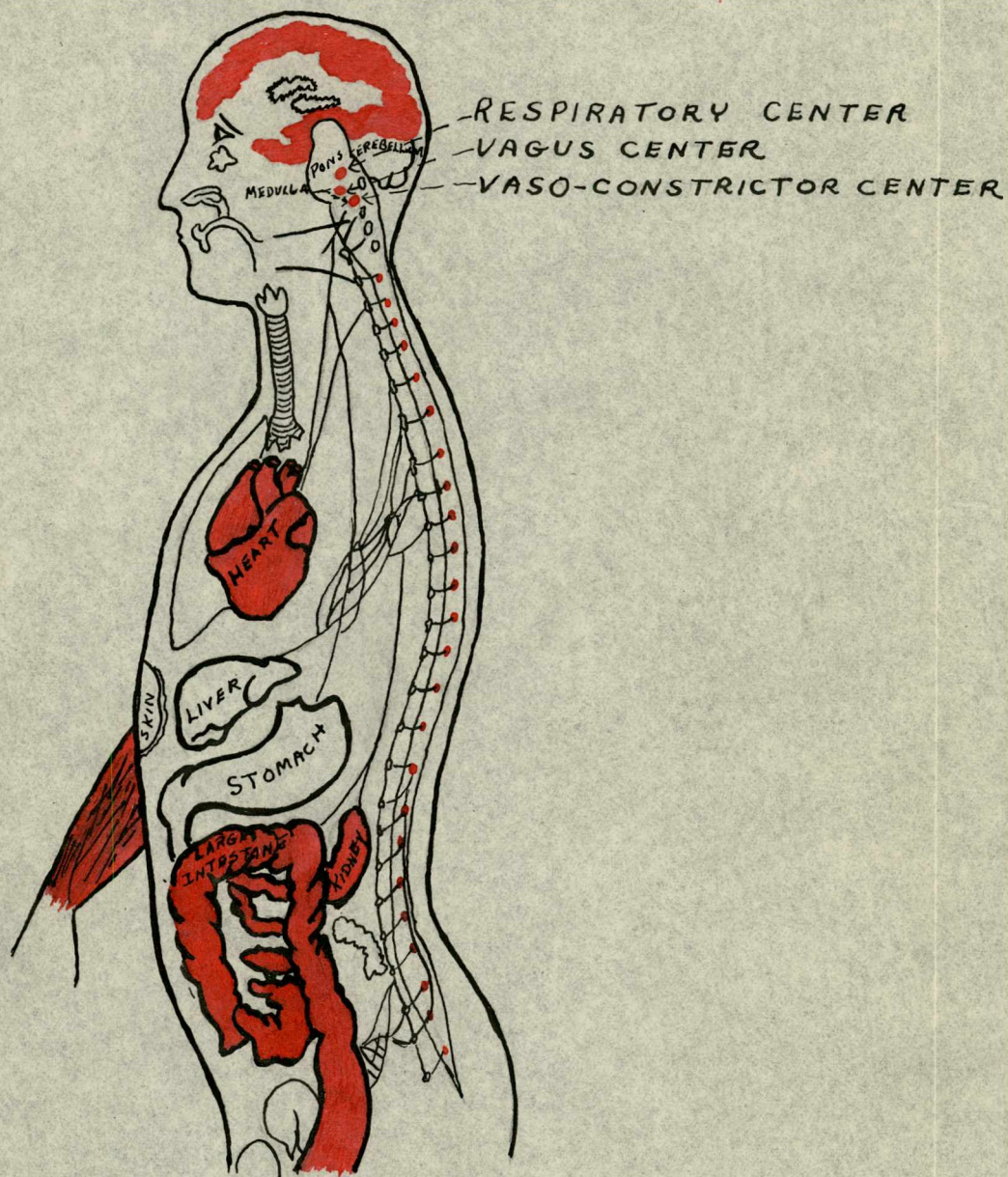


FIGURE 4.

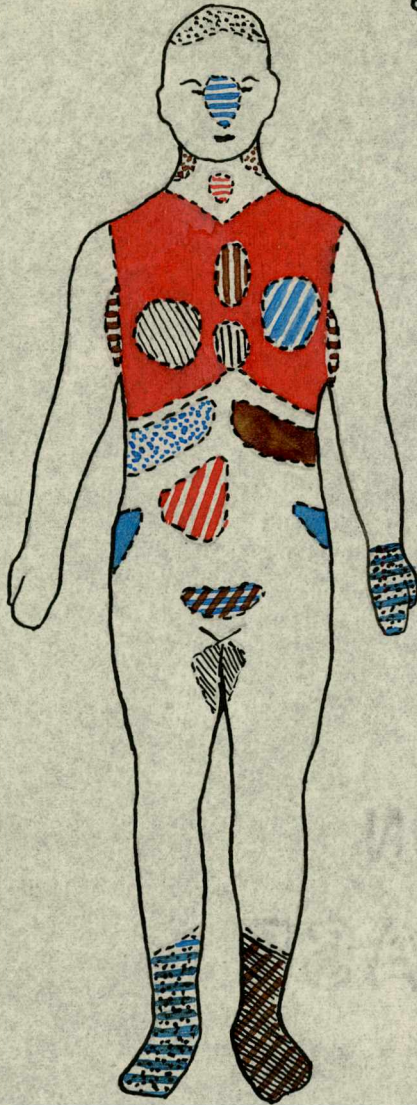
Figure Illustrating the Effects of Caffeine
(Code) Red: Stimulation

Blumgarten: Textbook of
Materia Medica, Pharmacology and
Therapeutics. Macmillan Co; 1941.
7th ed., Chapter 35, Page 386.

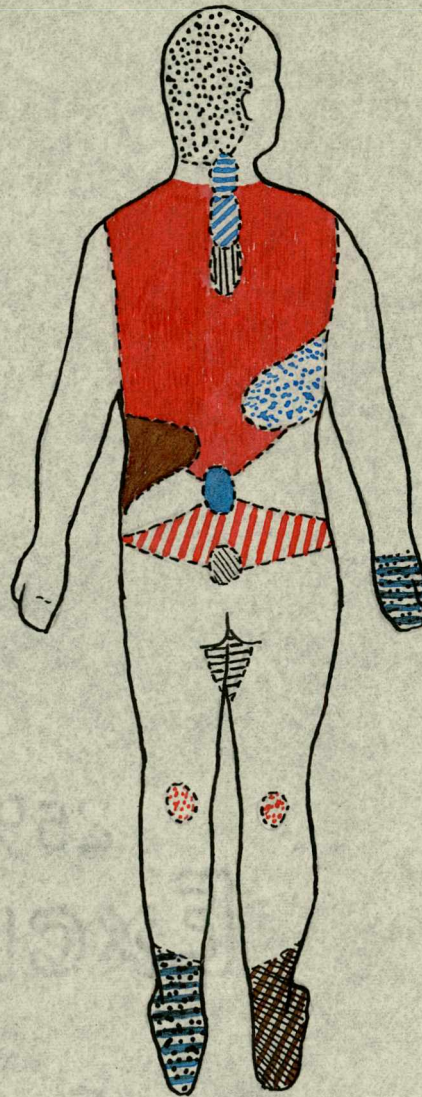
FIGURE 5.

REFLEX AREAS of the skin

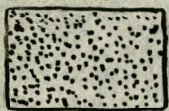
74



ANTERIOR



POSTERIOR



BRAIN



NASAL
MUCOSA



CAROTID
ARTERY



PHARYNX
LARYNX



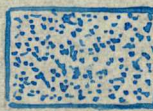
SPLEEN



POPLITEAL
VESSELS



STOMACH



LIVER



KIDNEYS



ESOPHAGUS



LUNGS



HEART



UTERUS



AXILLARY
ARTERY



INTESTINES



PROSTATE



BLADDER

Abbott, George Kwapp, M.D.,
*Physical Therapy and Nursing
Care*, PAGE 61. Design arranged
by Mary C. Noble, R.N.

I will touch upon another side of this problem as well, namely, our dangerous social dependence on various drugs, the problems of addiction, making it easier for us to slip into the pattern of submissiveness. The alcoholic has no mental back bone any more when you give him a drink. The same is true of the chronic user of sedative or other pills.⁴

One strategy of the totalitarian nations was to create an artificial shortage of drugs generally used, and replace them with barbiturates, which were available without prescription.

VI. THE LIE DETECTOR

Dr. Meerloo discusses the lie detector, narco-analysis⁵ and hypnotism, all of which invade the mind. He warns:

There is a very serious danger in all these methods of chemical intrusion into the mind. True, they can be used as careful aids to psychotherapy, but they can also be frightening instruments of control in the hands of men with an overwhelming drive to power.⁶

The lie detector, he believes, belongs to the category of mind control, for it forces its victim to admit his guilt, and since emotion from the ordeal can affect results, he believes it can be unreliable.

VII. HYPNOTISM

Dr. Meerloo lays bare hypnotism as a method of mind control. He calls it the "bastard son of fantasy and reality."⁷

⁴Joost M. A. Meerloo, M.D., The Rape of the Mind, p. 55.

⁵Psychiatrists use narco-analysis in interviews with patients to make them able to release mental reservations, by use of a drug, and talk more easily. Alcohol does the same thing for a drunk man. During World War II this procedure was used on American prisoners. Men who knew top military secrets carried a suicide capsule to take if they were captured.

⁶Meerloo, op. cit., p. 67.

⁷Unlike Mrs. White, Dr. Meerloo approves of hypnotism as a remedy

Ellen G. White explains:

There is, however, a form of mind cure that is one of the most effective agencies for evil. Through this so-called science, one mind is brought under the control of another, so that the individuality of the weaker is merged in that of the stronger mind. One person acts out the will of another. Thus it is claimed that the tenor of the thoughts may be changed, that health-giving impulses may be imparted, and patients may be enabled to resist and overcome disease.

This method of cure has been employed by persons who were ignorant of its real nature and tendency, and who believed it to be a means of benefit to the sick. But the so-called science is based upon false principles.⁸

It is claimed that a hypnotized person cannot be compelled to violate his conscience. Dr. Meerloo makes exceptions. He says:

Many psychologists would deny that such a thing could happen and would insist that no person can be compelled to do under hypnosis what he would refuse to do in a state of alert consciousness, but actually what a person can be compelled to do depends on the degree of dependency that hypnosis causes and the frequency of repetition of the so-called posthypnotic suggestions. . . . True, no hypnotizer can take away a man's conscience and inner resistance immediately, but he can arouse the latent murderous wishes which may become active in his victim's unconscious by continual suggestion and continual playing upon those deeply repressed desires. Actual knowledge of methods in brainwashing and menticide prove that all this can be done.⁹

Another reason why hypnotism is wrong is because it involves the will.

The will, that forms so important a factor in the character of man, was at the fall given into the control of Satan; and he has ever since been working in man to will and to do his own pleasure, but to the utter ruin and misery of man.¹⁰

in the hands of reputable practitioners, but he also points out the danger of the subject's being taken advantage of by unscrupulous persons.

⁸White, *ML*, p. 242. ⁹Meerloo, *op. cit.*, pp. 61-62.

¹⁰White, *5T*, p. 515.

Hypnotism lets Satan get just a little closer than he could otherwise come. Another reason why hypnotism is wrong is that it allows a human mind to come between the individual and Christ. Any form of mind control can only thwart God's purpose for man. "Behold, I stand at the door, and knock."¹¹ He wants to come in, but the heart must be free from other presences and voluntarily opened to Him.

God desires to bring men into direct relation with Himself. In all His dealing with human beings He recognizes the principle of personal responsibility. He seeks to encourage a sense of personal dependence, and to impress the need of personal guidance. He desires to bring the human into association with the divine, that men may be transformed into the divine likeness.¹²

Christ, not a human being, is the source of mind healing. In Him are provided great resources of thought that are life-giving in their influence.

Those whose minds and bodies are diseased are to behold in Christ the restorer. . . . If they cooperate with Him, obeying the laws of health, and striving to perfect holiness in His fear, He will impart to them His life.¹³

VIII. BRAINWASHING

Even more diabolical than hypnotism are the brainwashing practices used on enemy captives by the Communists during the recent World War.

A fantastic thing is happening in our world. Today a man is no longer punished for the crimes he has in fact committed. Now he may be compelled to confess to crimes that have been conjured up

¹¹Revelation 3:20. ¹²White, CH, p. 345.

¹³Ibid., p. 346.

by his judges, who use his confession for political purposes. . . . We must understand what impels the false admission of guilt; we must take another look at the human mind in all its frailty and vulnerability.¹⁴

Brainwashing is vicious. Upon first hearing of it, the United States condemned its victims without mercy. At present there seems to be somewhat more lenient attitude toward these men.

To the horrors the accused victim suffers from without must be added the horrors from within. He is pursued by the unsteadiness of his own mind, which cannot always produce the same answer to a repeated question. As a human being with a conscience he is pursued by possible hidden guilt feelings, however pious he may have been, that undermine his rational awareness of innocence.¹⁵

If the prisoner's mind proves too resistant, narcotics are given to confuse it: mescaline, marihuana, morphine, barbiturates, alcohol. If his body collapses before his mind capitulates, he receives stimulants: benzedrine, caffeine, coramine, all of which help to preserve his consciousness until he confesses.¹⁶

Strong personalities can tolerate physical agony; often it serves to increase stubborn resistance. No matter what the constitution of the victim, physical torture finally leads to a protective loss of consciousness. But to withstand mental torture leading to creeping mental breakdown demands an even stronger personality.¹⁷

One prisoner testifies, "The words were mine . . . but the thoughts were theirs. That is the hardest thing I have to explain: how a man can sit down and write out something he knows is false, and yet, to sense it, to feel it, and make it seem real."¹⁸

Dr. Meerloo explains the techniques in his book. They are

¹⁴Meerloo, *op. cit.*, p. 19.

¹⁵*Ibid.*, p. 29. ¹⁶*Ibid.*, p. 30.

¹⁷*Ibid.*, p. 27. ¹⁸*Ibid.*, p. 20.

torture, hunger, drugs, persistent repetition, mental conditioning. The ways in which they are used are most effective, formidable, and practically irresistible.

In The Reader's Digest of July, 1955, there is the story of John Hays, an American Protestant missionary in China, and his experience with brainwashing. His was the typical wear-down. He was locked in a small room with very inadequate food, no books, frequent questionings which he must answer with no explanation, and his answers were frequently misinterpreted, as he was not allowed to speak in Chinese. This was continued until he was at the breaking point. He felt ready to confess anything. The Communists made him a final offer, but John Hays spent the night before his final answer in prayer. To him was fulfilled the promise, "I will give you a mouth of wisdom, which all your adversaries shall not be able to gainsay nor resist."¹⁹

The next day before his judges, he corrected his interpreter, and was then allowed to speak in Chinese on his own behalf. He was a fascinating speaker, and as he explained his true position they listened. He was led back to his cell without knowing his fate, but eventually they released him to return to America, and five of his judges were executed.²⁰

¹⁹Luke 21:15.

²⁰Frederic Sondern, Jr., "The Brainwashing of John Hays," The Reader's Digest, July, 1955, pp. 27-32.

IX. COMPLETE MENTAL FREEDOM

Carl Rogers, in his nondirective counseling techniques, goes to the extreme in avoiding invasion of the client's mind. The personal worth of the individual, and his human dignity, are valued. The counselor respects the client's right to self-direction and his capacity to work out his problems. Thus Rogers sees the counselor's role as one of empathy and clarification.

It has also been my experience that the more deeply he relies upon the strength and potentiality of the client, the more deeply does he discover that strength. It has seemed clear, from our clinical experience as well as our research, that when the counselor perceives and accepts the client as he is, when he lays aside all evaluations and enters into the perceptual frame of reference of the client, he frees the client to explore his life experiences anew, frees him to perceive in that experience new meanings and new goals. . . . To me it appears that only as the therapist is completely willing that any outcome, any direction, may be chosen--only then does he realize the vital strength of the capacity and potentiality of the individual for constructive action.²¹

X. PARAPSYCHOLOGY

Considerable contemporary interest is directed to parapsychology. The term refers to extrasensory experience. There are a number of beliefs to which the word applies. Spiritualism, telepathy, existentialism, and even orthodox Christianity all have applications of parapsychology. The emotional experiences of certain religious denominations, the reports of Christians' seeing their deceased loved ones, the

²¹Carl R. Rogers, Client-Centered Therapy, p. 43.

"Divine encounter" of the existentialists, all belong to the realm of parapsychology. But parapsychology is not a phenomenon originating with the Evil One. The Bible and the writings of Mrs. Ellen G. White give many examples of the extrasensory. God speaks to the human heart with a voice not audible. "And thine ears shall hear a word behind thee, saying, This is the way, walk ye in it, when ye turn to the right hand, and when ye turn to the left,"²² has nothing to do with the nerves of hearing. "When Christ ascended to heaven, the sense of His presence was still with His followers. It was a personal presence, full of love and light."²³ "Henceforth through the Spirit, Christ was to abide continually in the hearts of His children. Their union with Him was closer than when He was personally with them."²⁴

A modern explanation of Christian parapsychology is given by Dr. Ernest White:

How does the Spirit guide men into truth? It seems to me that He works through the normal mental processes of the individual. He works through the intelligence and the emotional life with which He has endowed us. The Christian is called upon to use to the full the processes of reasoning and capacity for judgment which God has given him; but these alone are not sufficient. The Spirit operates at a deeper level, the level of the unconscious. Something more than an intellectual process is involved. There is a process of spiritual enlightenment originating above and beyond reason and manifesting itself in spiritual intuition. This intuition is not the result of logical reasoning. It comes in a flash, we hardly know whence. It may come in the silence when we are alone with God, just as the still, small voice was heard by the prophet of old. It rises into consciousness from the depths of our minds, and we know. We are exhorted to give a reason for the hope that is in us, but we did not acquire that hope simply on logical or rational

²²Isaiah 30:21.

²³White, SC, p. 78.

²⁴Ibid., p. 80.

grounds. Belief often comes not as the result of reasoning about things but by a process which cannot be accounted for solely on conscious grounds. Truth about spiritual things is often perceived by spiritual intuition quite apart from intellectual reasoning. The spirit in its depths comes into contact with the Spirit of God.²⁵

There are warnings to be observed in the interpretation of this experience. One is to beware of impressions, and another is to be careful of the value placed on flight of feeling.

XI. CONCLUSION

There are many mind relationships that are necessary and beneficial. One cannot escape influence, and when the best is chosen, it can only prove a blessing. There are other relationships that are constantly or intermittently present, but that call for individual adjustment to them, such as the appeal of modern advertising, or the pressure of a persuasive salesman. Domination, hypnotism, brainwashing, when employed to invade the human mind go beyond what is morally right.

The use of medicines, and even hydrotherapy, in the treatment of disease is accomplished through the brain and the nervous system in much of its application.

Parapsychology is another area of mind relations, and there is both right and wrong in the application of this science. The work of the Holy Spirit is as much parapsychology as is Spiritualism, but the first originated with heaven and the second with an evil spirit.²⁶

²⁵Ernest White, M.D., Christian Life and the Unconscious, p. 110.

²⁶See Appendix C for further material on this chapter.

CHAPTER IX

BODY AND MIND

Emphasis needs to be placed upon the body and mind combination as well as on the mind and body relationship. There are as many times when the body produces effects on the mind, as times when the mind reproduces its activities in body response. "Mind on body" and "body on mind" are both statements found in the writings of Mrs. White. That this aspect is really important is recognized thus: "The body is the only medium through which the mind and soul are developed for the upbuilding of character."¹

The Bible also recognizes the importance of the body upon the mind. The Apostle Paul mentions the body first and then the mind afterwards when he writes to the Romans: "I beseech you therefore, brethren, by the mercies of God, that ye present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service." Then he adds, "But be ye transformed, by the renewing of your mind."²

I. ALL ILLNESS INVOLVES BOTH BODY AND MIND

No one is ill without the involvement of the mind, even in a predominatingly body situation. Fever arising from an infection brings on delirium. The Communists and Nazis tortured the body to gain control of the mind.

¹White, MM, p. 130. ²Romans 12:1, 2.

There is mental adjustment to make even to a bad cold. There are things anyone would rather do than spend a day or so in bed, or even be about in discomfort. Pain always involves mental tolerance. The restrictions of diet, bed rest, disagreeable treatments, the prostration, the physical inadequacy, all total up in mental attitudes and mental, as well as physical, discomfort.

There are always uncertainties concerning outcomes, how long, how much disability, the disturbance of the living patterns, the urge of responsibilities, prospects of gains that must be relinquished—all these can accompany acute, as well as chronic, illness. The despondency, the irritability suffered, the restlessness, the insomnia, the stage when the patient is too ill to care, and the time of convalescence with its restrictions, boredom, and worries, its languor and exhaustion, all these are marginal products of physical illness.

II. CHRONIC DISEASE

Acute disease may be quickly forgotten. But chronic diseases, such as diabetes, heart disease, rheumatic fever, cancer, and tuberculosis call for a reorientation of the patient's life. There is the initial upheaval of adjustment—the letting go of life as it has been known before, giving up hopes and ambitions, rearranging finances, and surrendering independence, completely in some instances, or to a lesser degree in others. There is always the consideration of the future, sometimes doubtful, and at other times more certain than hopeful.

Each disease will have its own reactions, and these will be

modified by the individuality of the sufferer. Diabetics know that they have a lifetime of restricted diet, of social interference and job adjustment. It is also known that the disease gives at least some reduction to life expectancy. To accept all this requires considerable fortitude and grace.

Tuberculosis attacks the most productive years, fifteen to thirty-five years, when the victim is just ready to live or is entering the height of his career. Then to give one or two precious years of productivity to bed rest, followed by more years of care and uncertainty even after a successful cure, is hard to accept.

Cancer usually strikes later in life, but its hopelessness is more certain, its pain more difficult to endure. One cancer patient may commit suicide, feeling that it is the kindest thing to do to relieve loved ones of the long months of care and watching. Another may stoically accept the situation, living a normal life as long as possible, and keeping up a happy front because it is the best for all concerned. Others may become fretful and unhappy, although this is not especially characteristic of cancer.

There are compensations in lessons learned and values gained from illness that are available from no other source. Suffering can perfect character or reveal its weakness.

III. TRAUMATIC ILLNESS

When the body has been damaged or disfigured by accidents, all the emotions and adjustments that can go with chronic illness must be

made, plus the adjustment to visible disfigurement or permanent handicap. Then the long straight road ahead can be very dark. Often there are feelings of inferiority to which the mind has a big task to adjust. The mind is capable of making the body ill, but when the body makes the mind suffer, the suffering can be intense. The crippled, the disfigured, the handicapped all have to cultivate courage. There are those who do learn that life still belongs to them, and that they belong to life and still have a contribution to make.

IV. CONCLUSION

Mind and body can form one combination, and body and mind still another. Mental reactions to bodily disease or injury can be painful and difficult, but life, with all its many possibilities, still belongs to all. Even suffering has its compensations in fortitude and understanding.

CHAPTER X

THE MENTAL ASPECTS OF CHRIST'S HEALINGS

Jesus was prepared by personal experience for His life work of dealing with sin and suffering. One element with which He dealt was guilt. During the long years before He came to earth, and ever since as well, guilt has been evaded in human philosophy. Both in His personal experience and in the approach He made to His mission, His work is unique and sympathetic.

I. JESUS' PERSONAL PREPARATION FOR HIS WORK

Even during His childhood, Jesus was learning understanding and sympathy.

During all these secluded years His life flowed out in currents of sympathy and helpfulness. His unselfishness and patient endurance, His courage and faithfulness, His resistance to temptation, His unfailing peace and quiet joyfulness, were a constant inspiration. He brought a pure, sweet atmosphere into the home, and His life was as leaven working amidst the elements of society. None said that He had wrought a miracle; yet virtue--the healing, life-giving power of love--went out from Him to the tempted, the sick, and the disheartened.¹

Before entering His ministry He had already experienced personal suffering. In the wilderness of temptation He had suffered human agony.

His human nature shrank from the conflict that awaited Him. For forty days He fasted and prayed. Weak and emaciated from hunger, worn and haggard with mental agony, "His visage was so marred more than any man, and His form more than the sons of men."²

¹White, MH, p. 350.

²White, DA, p. 118. The Scripture is Isaiah 52:14.

After the foe had departed, Jesus fell exhausted to the earth, with the pellar of death upon His face. The angels of heaven had watched the conflict, beholding their loved Commander as He passed through inexpressible suffering to make a way of escape for us. He had endured the test, greater than we shall ever be called to endure. The angels now ministered to the Son of God, as He lay like one dying.³

There were many times, no doubt, when human suffering was again felt by Him. In dealing with Judas, Mrs. White brings out this idea. "Day after day, when the burden lay heaviest upon His own heart, He had borne the pain of continual contact with that stubborn, suspicious, brooding spirit."⁴

Jesus wept at Lazarus' grave; He shook with sorrow as He viewed Jerusalem and realized its not-too-distant fate. No actual physical disease could touch His body, for He lived in such perfect accord with the laws of life, but He did suffer mental reactions which expressed themselves in His physical being. He was "a man of sorrows, and acquainted with grief," that He might bear "our griefs," and carry "our sorrows."⁵ "For we have not an high priest which cannot be touched with the feelings of our infirmities."⁶

II. GUILT AND HEALING

"There is a divinely appointed connection between sin and disease."⁷ The sufferings of Jesus testify that He, though innocent,

³Ibid., p. 131. ⁴White, Ed., p. 92.

⁵Isaiah 53:3, 4. ⁶Hebrews 4:15.

⁷White, 5T, p. 444.

was sharing with mankind the penalty of sin. And His healings often dealt with guilt and sin. The restoration that Christ granted often included the forgiveness of sin. The Bible instruction to the church of the Gospel dispensation includes forgiveness with divine healing. "Is any sick among you? let him call for the elders of the church; and let them pray over him, anointing him with oil in the name of the Lord: and the prayer of faith shall save the sick, and the Lord shall raise him up; and if he have committed sins, they shall be forgiven him."⁸ It might be properly questioned, How does the forgiveness of sin figure in miraculous healing as it is practiced at the present time? And it could be answered that men, in place of seeking forgiveness, have sought out many, many ways of ignoring guilt. There were gods among the ancients: wicked gods, immoral gods, benign gods, vague gods, far-away gods, and even an "Unknown God." In the worship of these gods there was no recognition of guilt and no forgiveness of sin. The Apostle Paul was acquainted with Greek philosophy, and it is Paul's writings that treat more thoroughly and directly the subject of conscience than do the works of any other Bible writer.⁹

There have been many systems of philosophy and ethics in later times, and in none of them, except the Hebrew-Christian system, is guilt admitted and completely cured. Rationalism, the descendant of Greek philosophy, reasoned its way through on its own power—making the

⁸James 5:14-15.

⁹Carl F. H. Henry, Christian Personal Ethics, p. 514.

human mind ultimate. Naturalism, of which Pantheism is one form, disseminates God through all nature, as an all-pervading good. Man, thus, includes himself as a part of God. There are several forms of Hedonism: the Cyrenics with their goal of pleasure for the present, the Epicureans, who aimed more realistically at what would give the most pleasure in the long run. Jeremy Bentham and John Stewart Mill went so far as to admit the Golden Rule into their Utilitarianism. But all of these ignored the Bible teaching of guilt and restitution. Among the political Naturalists, guilt is the farthest removed in their theory that might makes right. Nietzsche created the superman and Karl Marx was the exponent of modern Socialism. Kant, who taught a kind of morality in the form of what man ought to do, conceived of no sin and no guilt. Guilt finds no place in the theory of strict evolution, for man is becoming better and better according to that teaching. The Pragmatism of John Dewey, also appearing in many other forms of philosophy, makes right dependent upon experience and custom; thus moral standards become flexible and relative. "When all ethical reference is depicted as merely finite and relative, the notion of decisive condemnation must be swept away."¹⁰

The existentialists gainsay guilt when they accept as the only revelation a personal disclosure of God. Calvinistic determinism weakens guilt. The Roman Catholic Church lessens guilt in its confession to a human being, in the doctrine of penance, and in the claim to have

¹⁰*Ibid.*, p. 509.

changed the Ten Commandments. Thus men in a hundred ways evade guilt. They are pleasure-mad; they are absorbed in getting gain; they create their own moral world. Men, in their effort to ignore guilt, degrade man to the level of a highly developed animal, or, on the other hand, elevate their own competence to dismiss the need of God. Men excuse guilt, they rationalize it away, and they blame others for their guilt. They take every way but the right way.¹¹

Conscience, in contemporary life, is a foundling. Its paternity is questioned, its existence annoying, its demands for attention and responsibility burdensome. The dilemma of modern civilization could indeed stem from the failure of influential thinkers to support the Christian view of conscience. Modern thought, in turn, quite easily relegates the foundling to complete abandonment.¹²

The world of human decision and relations is a fallen world in revolt against the holy will of the Creator-God. The image of God is sullied. Man is a moral rebel who is threatened with Divine wrath.

This fundamental premise places the Christian interpretation of the moral life in direct opposition to sin-concealing views. It gives no quarter to pantheistic and idealistic notions that the whole of reality is made up of an indestructible good. Biblically-revealed ethics dismisses as shallow all evaluations of the ethical situation which hesitate to view sin, death, and Satan as determinative categories. Tolerance of depthless views of the moral predicament in sin would only give birth to equally superficial views of man's deliverance. Christianity clearly points out the moral divorce of God and man. Reconciliation is man's most desperate need.¹³

¹¹While it is true that psychiatry deals with guilt, it is not in the same way that Christianity deals with it. Dr. Ernest White, a Christian psychiatrist, says: "It appears to me that psychology has no satisfactory answer to the problem of guilt. It may bring relief by confession and by the release of emotion accompanying it, but it cannot bring peace and assurance of forgiveness. The doctrine of forgiveness which Christianity has to offer can and does rid people of guilt and sets them free from its bondage." White, *op. cit.*, p. 156.

¹²Henry, *op. cit.*, p. 509.

¹³*Ibid.*, p. 172.

Jesus came to seek and to save that which was lost. In His ministry He placed sin and guilt and conscience in their right relation to man's condition, and then He applied the true remedy--His own salvation. When He came He found that

The deception of sin had reached its height. All the agencies for depraving the souls of men had been put in operation. The Son of God, looking upon the world, beheld suffering and misery. With pity He saw how men had become victims of Satanic cruelty. He looked with compassion upon those who were being corrupted, murdered, and lost. They had chosen a ruler who chained them to his car as captives. Bewildered and deceived, they were moving on in gloomy procession toward eternal ruin--to death in which there is no hope of life, toward night to which comes no morning. Satanic agencies were incorporated with men. The bodies of human beings, made for the dwelling-place of God, had become the habitation of demons. The senses, the nerves, the passions, the organs of men, were worked by supernatural agencies in the indulgence of the vilest lust. The very stamp of demons was impressed upon the countenances of men. Human faces reflected the expression of the legions of evil with which they were possessed. Such was the prospect upon which the world's Redeemer looked. What a spectacle for Infinite Purity to behold!¹⁴

This was the picture of guilt that faced the Son of Man as He took upon Himself man's restoration. "By His humanity Christ touched humanity; by His divinity, He lays hold upon the throne of God."¹⁵

III. EXAMPLES OF JESUS' UNDERSTANDING

"The Saviour made each work of healing an occasion for implanting divine principles in the mind and soul."¹⁶ All of His healing was a ministry to both mind and body, an occasion to reach the soul.

¹⁴White, DA, p. 36.

¹⁵Ibid., p. 24.

¹⁶White, MH, p. 20.

Three adulterous women are recorded as having received healing from Jesus--the woman of Samaria, Mary Magdalene, and the woman taken in adultery. For these women Christ had no condemnation. He led them to see their sin and to accept restoration.

Wherever there existed a sense of need, there He saw opportunity for uplifting. Souls tempted, defeated, feeling themselves lost, ready to perish, He met, not with denunciation, but with blessing.
 . . .

In every human being He discerned infinite possibilities. . . . Looking upon them with hope, He inspired hope. Meeting them with confidence, He inspired trust.¹⁷

These are examples of His greatest miracles. "In the uplifting of this fallen soul [the woman taken in adultery], Jesus performed a greater miracle than in healing the most grievous disease."¹⁸

Mary Magdalene had been delivered from seven devils, and at another time in Christ's ministry He healed two madmen at Gadara from demons that called themselves "Legion." When the evil spirits left them, Jesus spent a little time with them. The swinekeepers, whose herds received the devils and plunged into the sea, had gone to the city and returned with some of the populace, who requested Jesus to leave their territory.

Not only was this a healing of mind and body, but Jesus went even farther and provided for their rehabilitation in the telling of their experience to their own people. The healing of the demoniacs

¹⁷White, Ed., pp. 79-80.

¹⁸White, DA, p. 462.

had occurred early in the morning, and that same day Jesus recrossed the lake, and found on the opposite shore a multitude to receive Him.

After teaching and healing for a time, He left to attend a feast at the home of Levi Matthew. It was while at Matthew's home that He was found by Jairus, who came to Him from the death chamber of his little daughter. On the way to Jairus' home Jesus encountered a woman who had been ill twelve years. No physician could help her. A little consideration reveals more than is directly stated in the simple narrative. This woman, according to the ceremonial law, was unclean.¹⁹ She might not attend the synagogue, but she had heard of Jesus and His many miracles, and concluded that if she could but touch the hem of His garment, she would be cured. Even this she was ceremonially forbidden to do, but she must have heard how He willingly touched even lepers. Luke tells the story from the standpoint of a physician. He stresses the hopelessness of the case and her economic bankruptcy. It is Mark who includes the fact that she had suffered many things of many physicians, while she only grew worse. Luke did not implicate his fellow physicians. He justified them with the hopelessness of the case.

If this woman were treated by present-day methods, she would be given a blood-building diet, put on medications that would overcome her anemia, and probably some endocrine preparation would be prescribed, along with some potent vitamins. She would be given blood transfusions, and surgery probably would complete the cure. Instead of her being

¹⁹Leviticus 15.

considered a sinner, her friends would visit her in the hospital, her room would be filled with loving offerings of flowers, and her husband would pay the bill. There would be no long years of hopelessness and loneliness. But these methods, too, are outcomes of the love that Jesus shed on this dark, sinful world.

But in Jesus' time a woman like this still had more problems. According to the rabbinical law she was divorced from her husband. She was stigmatized by society, and she was a sinner. But Jesus met these problems too, and provided for her rehabilitation by giving her hope and confidence. She would never forget the moment when His power thrilled through her body, nor His words, "Daughter, be of good comfort; thy faith hath made thee whole."²⁰

In the meantime Jairus was waiting. The condition of his daughter was critical. When he left home to find Jesus, she was at the point of death. Jesus had started promptly, but He was delayed by the crowd and then by this woman. A messenger brings the news that the child is dead, and adds the suggestion, "Trouble not the Master." But Jesus pressed on and reached the deathbed of the little girl.

Then He spoke, and said, "Maiden, arise." That may be, in some senses, perfectly accurate translation, and yet, as a matter of fact, it has missed something of infinite beauty. Mark tells us that He said, "Talitha cumi." Now that is not Greek; it is not Hebrew, but it is Aramaic. It was the language almost unquestionably of His home, the common language of the common folk, in the common things of life. We render the saying with supposed dignity as "Damsel, arise." Let us look at it a little carefully. The

²⁰Matthew 9:22.

word, "Talitha," is diminutive. It means "Little lamb." It was a word of infinite love and tenderness. We are looking and listening, and we see God manifest in the flesh put His hand, the hand that guides and governs the movement of all worlds, upon the dead hand of a little lassie, and we hear Him call her, "Little lamb." With this address He uttered the word of authoritative command, "Arise."²¹

When the child opened her eyes, whole and well, Jesus presented her to her parents, and remembered her immediate need. He told them to give her something to eat.

When sin entered the world, guilt figured in the destruction of the physical powers, and in Christ's healings there were those whose lives were haunted by the consciousness of sin. To these especially, Jesus was a messenger of mercy, not only with healing, but with the assurance of sins forgiven. The paralytic let down from the rooftop, the man healed at the Pool of Bethesda, the lepers, whose very disease was a symbol of sin, the devil-possessed, impotent even to request healing from Him--all these were healed of sin as well as of disease. Jesus' healings could make men whole.

IV. CONCLUSION

To make His ministry effective, Christ Himself had undergone suffering in the wilderness, and there are many evidences recorded of an inner life of emotional keenness. Jesus' work was unique, because He went to the root of disease, back to its original cause as it came about in Eden. He ministered to the whole being--body, mind, and soul.

²¹G. Campbell Morgan, The Great Physician, pp. 166-67.

He entered into the whole circumstances, sometimes including a measure of rehabilitation. There were wide implications in His ministry. Sin had reached its limits; Satan claimed both mind and body in the diseases he imposed upon men. His victims were so hopelessly entangled that only divine power could break through and set them free.

How different are Jesus' methods and His understandings from those of the greatest human minds! Outside Christianity men's efforts at gaining the best in mental ministry are to find a way around its cause--sin and guilt. The gentle words of Jesus forgave sin and cleansed the soul. "Many are suffering from the maladies of the soul more than from diseases of the body, and they find no relief until they come to Christ, the wellspring of life."²² The same forgiveness and the same cleansing are still available in Him.

²²White, The Faith I Live By, p. 99.

CHAPTER XI

MORAL RESPONSIBILITY IN MIND AND BODY RELATIONSHIPS

Placing moral responsibility for mind-body relationships and their outcomes involves a large number of factors such as the individual's capacities, his physical inheritance, the environment, and the demands made upon him.

I. DIFFICULTIES IN DETERMINING MORAL RESPONSIBILITY

When Christ healed a man born blind, His disciples asked Him who had sinned, this man or his parents. Jesus placed no responsibility. At times even physicians are unable to understand all the mechanisms of a disease. Causes are often difficult to search out. Dr. Shryock says:

There is a fairly large percentage of cases of so-called "functional" or psychogenic disease, however, in which it is difficult, if not impossible, to discover any emotional factor which seems to have been responsible for the production of the disease. The disease itself is the type which results from an imbalance of the autonomic nervous system but inquiry into the patient's history fails to reveal a precipitating emotional factor. It may be properly assumed in these cases that, for one reason or another, the hypothalamus is functioning abnormally.¹

II. INDIVIDUAL DIFFERENCES

Individual differences are recognized in mental ability, physical appearance, mechanical performance, and in all other areas

¹Harold Shryock, M.D., "Psychobiology," Chap. 2, p. 10. (Mimographed.)

of human ability and behavior, and these too are to be taken into consideration in moral responsibility.

Jesus, our advocate, is acquainted with all the circumstances with which we are surrounded, and deals with us according to the light we have had, and the circumstances in which we are placed. Some have a much better organization than others. While some are continually harassed, afflicted, and in trouble, because of their unhappy traits of character, having to war with internal foes and the corruption of their nature, others have not half so much to battle against. They pass along almost free from difficulties which their brethren and sisters who are not so favorably organized, are laboring under. In very many cases they do not labor half so hard to overcome and live the life of a Christian as do some of those unfortunate ones I have mentioned. The latter appear to disadvantage almost every time, while the former appear much better, because it is natural for them so to do. They may not labor half so hard to watch and keep the body under, yet at the same time they compare their lives with the lives of others who are unfortunately organized and badly educated, and flatter themselves with the contrast.²

III. SATAN HAS A PART IN ILLNESS

The enemy is to be reckoned with in accounting for illness. Even the White family suffered illness and death. Mrs. White herself was often afflicted. God allowed Job to suffer, and he is described as a perfect man.

I saw that the enemy will contend either for the usefulness or the life of the godly, and will try to mar their peace as long as they live in this world. But his power is limited. He may cause the furnace to be heated, but Jesus and angels will watch the trusting Christian that nothing may be consumed but the dross. The fire kindled by Satan can have no power to destroy or hurt the true metal.³

Death is the sentence pronounced upon all humankind. As long as

²White, 2T, pp. 74-75. ³White, 1T, p. 309.

there is sin there will be death, and if death, there will be sickness, and in all sickness the mental state is a part. Either somatic or psychosomatic disease can be a hereditary potential; both can come about through ignorance, as well as willful disregard of natural law. In a world full of sin, disease and death must exist.

The Christian who manifests patience and cheerfulness under bereavement and suffering, who meets even death itself with the peace and calmness of an unwavering faith, may accomplish for the gospel more than he could have effected by a long life of faithful labor.⁴

IV. STATUS OF MORAL RESPONSIBILITY

What, then, is the real status of moral responsibility? Should it not consist of what it is possible for one to know to prevent both organic and psychosomatic disease? Surely it is clarified in the following statement by Mrs. White:

They [men and women] need to be impressed with the fact that all their powers of mind and body are the gift of God, and are to be preserved in the best possible condition for service.⁵

Life is a holy trust, which God alone can enable us to keep, and to use to His glory. But He who formed the wonderful structure of the body will take special care to keep it in order if men will not work at cross-purposes with Him.⁶

Dr. Raymond Hill says, "Wise, indeed, is the man who understands that he is a hyperparasymphathetic nervous system reactor." In further developing the subject he goes on to explain:

In the hyperparasymphathetic reactor the mental adaptation to environmental stress and strain, whether real or imaginary, causes

⁴White, The Acts of the Apostles, p. 465.

⁵White, MH, p. 130. ⁶White, 6T, p. 379.

the stomach to secrete digestive juices, increase its blood supply, and go into muscular spasms, though no food is in the stomach. Because this is a disturbance of the automatic controlling mechanism, it is not under voluntary mental control, hence the production of stomach symptoms, whether he wants them or not. . . .

.

In my opening paragraph I said, "Wise, indeed, is the man who understands that he is a hyperparasymphathetic nervous system reactor." May I add: Wiser is he if he understands that it is not what happens, but his attitude toward it, that makes him feel the way he feels. This is especially true in the production of stomach ulcer, with its accompanying symptoms. Wisest is he if he understands that the development of a Christian character--with its hope, its faith, its attitude toward adversity, its source of power, as characterized in the Sermon on the mount--can modify the reaction and goals of the individual who espouses it.

This fact is easy to talk about and relatively easy to understand--but hard to apply. Yet therein lies the real prevention of stomach ulcers. Dullness of understanding necessitates the continued use of drugs for symptomatic relief. This either sedates the brain to control anxiety and tension, blocks the transmission of parasympathetic nerve impulses to the stomach to modify its function, or neutralizes the excessive output of gastric juices.⁷

Dr. Clarence Dale also explains moral responsibility in nervous conditions.

In conclusion, we can assert that nervousness can be avoided or corrected. Each one should analyze his own situation and approach it from the viewpoint of preventing causes and breaking the vicious cycles that are likely to occur. Obviously, those who claim the divine promises for help in the many distresses of life have a great advantage in overcoming nervousness.⁸

It will be found, however, that, like sanctification, right mental habits are "not the work of a moment, an hour, or a day."⁹

⁷Raymond Hill, M.D., "Ulcers--A Disease of Modern Life," Review and Herald, May 17, 1956, p. 18.

⁸Clarence Dale, M.D., "Must I Be Nervous?" Review and Herald, June 2, 1955, p. 18.

⁹White, II, p. 340.

V. WHERE RESPONSIBILITY BEGINS

Consecration, or what is thought to be consecration, can be made without a very vivid idea of the parts involved. Paul speaks of the "whole spirit and soul and body" being "preserved blameless."¹⁰ In his letter to the Romans he admonishes them,

I beseech you therefore, brethren, by the mercies of God, that ye present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service. And be not conformed to this world: but be ye transformed by the renewing of your mind, that ye may prove what is that good, and acceptable, and perfect, will of God.¹¹

In speaking of consecration, little emphasis is placed, often, on the body. The will, the heart, the intellect, are called for, but Paul puts the body in first place, making it the vehicle of the mind.

Those who put their trust in Christ are not to be enslaved by any hereditary or cultivated habit or tendency. Instead of being held in bondage to the lower nature, they are to rule every appetite and passion.¹²

By steadfastly keeping the will on the Lord's side, every emotion will be brought into captivity to the will of Jesus. You will then find your feet on solid rock. It will take, at times, every particle of willpower which you possess, but it is God that is working for you, and you will come forth from the molding process a vessel unto honor.¹³

VI. CONCLUSIONS

When drawing conclusions affecting moral responsibility, it must be recognized from the material presented in this chapter, along with

¹⁰1 Thessalonians 5:23.

¹¹Romans 12:1, 2.

¹²White, MH, p. 175.

¹³White, ST, p. 514.

what has been discussed in preceding chapters, that many factors are to be taken into consideration. These are presented in the following conclusions:

1. Human beings are born with the capacity to make emotional responses. Before sin entered, these responses ministered to the happiness of mankind, but when sin added trials and sorrows, grief, anxiety, and guilt, man's nervous system was burdened with new adjustments. These changes are necessarily felt by every human being, thus making possibilities of psychosomatic disease the normal inheritance of all. If death is the "wages of sin,"¹⁴ then part of the wages of sin is sickness.

2. Moral responsibility may be impossible to place as far as human understanding is concerned. Even physicians cannot always determine the cause of either psychosomatic or organic disease. Then, many hereditary factors are impossible to deal with. Even Christ did not place blame when He healed the man who was born blind. Although He knew the whole long train of causes and effects, He did not reveal it to His disciples when they asked Him who had sinned, the man or his parents.

3. Good men, like Job, have suffered. "There was none like him in all the earth, a perfect and an upright man."¹⁵ Even Christ, the Great Healer, was "a man of sorrows, and acquainted with grief,"¹⁶ and He eventually died a psychosomatic death.

¹⁴Romans 6:23. ¹⁵Job 1:8. ¹⁶Isaiah 53:3.

4. The mental element is common to all disease. Even Christians cannot escape it.

5. There are great variations among individuals--some with far more sensitive nervous systems than others, and thus more susceptible to maladjustments and functional disease.

6. Many tension-bearing situations are inevitable, and may call for more nervous stability than some individual possess. Some persons, too, are called upon to bear, above others, wear and tear on the nervous system. There are times when legitimate demands are made upon individuals which cannot be ignored, even at the expense of physical damage.

7. Environment plays a constant part in mental health, but the early environment, before the individual has developed the maturity to direct his own life, has already been most important in shaping the capacity to deal with frustration.

8. It must be recognized that there are individual differences in moral responsibility. The information possessed, or the information possible to gain, figures in moral responsibility.

9. In some minds there seems to be an element of stigma attached to mind-caused diseases, while the sufferer who violates natural laws may be more easily excused, though he brings physical ailments upon himself. Both have violated God's laws, both are suffering, and both bear responsibility proportionate to their opportunities to know and to choose.

10. While there are some causative factors that favor the development of psychosomatic illnesses that are beyond the personal

responsibility of the one concerned, there are other contributing factors for which he is responsible. Among them are undue anxiety, worry, jealousy, and all other forms of self-centeredness, which belong to the long list of causes of neurotic diseases.

11. The Christian has resources beyond those which are known to those who do not have access to the power of Christ. It is the duty of the Christian to include his body as well as the will and intellect in his consecration to God, and then he need not carry a burden of guilt; Christ forgives his sins. The Christian may bring his problems to One whose Word is filled with "exceeding great and precious promises: that ye might become partakers of the divine nature, having escaped the corruption that is in the world through lust."¹⁷

12. Emotional growth is gradual; it takes a lifetime to perfect, and there are possibilities past any human attainment. "All who would be workers for God must strive for perfection of every organ and quality of mind."¹⁸

The love which Christ diffuses through the whole being is a vitalizing power. Every vital part--the brain, the heart, the nerves--it touches with healing. By it the highest energies of the being are roused to activity. It frees the soul from the guilt and sorrow, the anxiety and care, that crush the life forces. With it come serenity and composure. It implants in the soul joy that nothing earthly can destroy,--joy in the Holy Spirit,--health-giving, life-giving joy.¹⁹

¹⁷2 Peter 1:4. ¹⁸White, COL, p. 330.

¹⁹White, MH, p. 115.

CHAPTER XII

SUMMARY AND RECOMMENDATIONS

I. SUMMARY

1. Long before organic disease appeared, guilt, anxiety, sorrow, and fear began to "break down the life forces, and to invite decay and death."¹

2. These emotional developments that had introduced physical breakdown to the human race culminated in the death of Christ, a death due to both mental and physical suffering.

3. Involved in mind and body are both physiological and psychological mechanisms. Particularly important are the nervous system and the endocrine system. Among other things, health depends upon a balance between the sympathetic and parasympathetic nervous system functioning. Good functioning of the endocrine glands is also a part of health.

4. Emotions are closely bound up with the autonomic nervous system and are also related to the activities of the endocrine glands. Emotional experiences alter both organic functions and body chemistry.

5. Homeostasis or constancy of bodily integrity is essential to physical well-being. Too great or too long variations in this status quo become serious or even fatal.

6. There are certain constant psychological needs--security,

¹White, MH, p. 241.

love, self-esteem, self-realization. Good adjustment, personal happiness, and even physical well-being are bound up in the fulfillment of these needs, so that they become physiological as well as psychological.

7. Even prenatal life is affected by environment, limited as it is. After birth the food the mother provides, the love and acceptance she gives, the very atmosphere in which the little one develops, are the responsibility of the mother above everyone else.

8. Before the child is capable of any moral responsibility of his own, the parents have done much to form his conscience or superego--a vital part of the child's moral discipline.

9. The kind of discipline the home supplies--directive discipline, or discipline that is negligent, overindulgent, or domineering--will tell on the future life of the child both mentally and physically. The home influence goes farther than any later force brought to bear upon the child in the development of good or poor adjustments.

10. As a child matures, more influences are brought into his life. (a) The school and its teacher, playmates, and lesson material. (b) The level of the culture in which he lives, with its mores. (c) His contact with religion and what it is made to mean to him. (d) Later the job, with all its agreeable and disagreeable features, its companionships, and the demands it makes.

11. Environment never ceases to cast its influence on the life. Even in old age there are still emotional needs to be met, still mind and body relationships which operate. Intellectual, emotional, and spiritual growth can continue to the end of life.

12. A few diseases are hereditary, some are prenatal, but most are acquired. However, the type of constitution inherited does much to determine the future resistance or susceptibility to certain diseases. Psychosomatic disease has to do with the balance between the two parts of the autonomic nervous system, the kind of endocrine system inherited and the constitutional adequacy of the individual.

13. The capacity to learn is a provision that goes with the freedom of man. Learning is the result of environment and the way it is appropriated by the individual and those responsible for him.

14. Right thinking is one source of resistance to disease, both physical and psychogenic. If that which fills the phenomenal field is self-reference in the form of anxieties, discontent, discouragements, hurts, self-depreciation, resentments, there can be no mental health. If in the field of reference there is objectiveness, inspiration, kindly thoughts of others, and above all, a consciousness of Christ's presence, there will be mental health. Reformation in thinking may require decision, time, diligence, but the endeavor is worthwhile. During the early life, parents can do much to help a child form good habits of thinking. Happiness is particularly important to a child.

15. No one can escape influence, but when it becomes possessive it has exceeded its legitimate sphere. Radio, television, politics, advertising, salesmanship are continually assaulting the consciousness, and to be unaware of these pressures of mass media is to become their victim. Domination is a form of mind control, as are hypnotism and brainwashing. In these invasions of the individual's mental processes

the moral limit has been exceeded. Mind control is wrong because it involves the will; it gives human control the place that should be yielded to God. If another has the mind under his control, divine influences are crowded out.

16. Many drugs act on the nervous system. Their use calls for discrimination, especially when they act on the will or are potential for dependence.

17. For the time of trouble yet to come, tools are already formed for mental torture and mind control. Then the promises will be needed, "If ye drink any deadly thing, it will not hurt you."² And surely the promises can be extended to the use of hypodermic poisons, even though they were not in existence when the promise was given. As with John Hays, when he was the victim of the Chinese Communists, God's people can have words given them when they must answer their enemies.

18. The subject of parapsychology offers both right and wrong uses. While the extrasensory can be concerned with Spiritualism, hypnosis, and other objectionable beliefs, it also applies to the soul's relation to God.

19. In Christ's time sin and disease had reached a climax. Christ not only healed disease, but He set in motion influences that have reached to the present time. From Adam to Christ and from Christ to the present time, guilt has figured in man's experience. Guilt is mentally uncomfortable. It is a contributing factor in physical

²Mark 16:18.

disease. Men have discovered their own ways of dealing with guilt, but they are illogical and ineffective ways. When Christ came, He recognized guilt as a causative factor in disease. He could say, "Go, and sin no more," and "Thy sins be forgiven." Even though sin was offensive to Him, and even though He combined the forgiveness of sin with many of His miracles of healing, He withheld condemnation from those with whom He dealt. He made them feel His help, not His disapproval.

20. The question of moral responsibility in mind-caused diseases has many facets. There can be interpretation, individual differences in responsibility, environmental pressures, different opportunities for knowledge. As long as sin and death reign there must be sickness. Much the same personal responsibility exists for organic disease as for psychosomatic disease. Either one may result from overwork, and whether the overwork has precipitated a heart attack or a nervous breakdown, the moral responsibility is the same. Wrong eating has its mental effects, but whether its results are psychosomatic or physical disease in no way lessens moral responsibility.

II. RECOMMENDATIONS

Besides the more extensive research that could be done on the subject of mind and body, there are other areas of psychology which could profit by study of Mrs. White's writings. Some of these might be listed as follows:

1. Child psychology. Present-day concepts would find abundant

corroboration in these writings. Some modifications might also appear.

2. Individual differences. Mental capacity is measured by IQ tests. There are scattered statements that clarify these concepts. These statements, if brought together, would make a profitable study.

3. Human relations. There is abundant material accessible for the study of this topic. Some illuminating viewpoints on counseling would also be discovered in this connection.

4. Psychology. This subject is Satan's chosen way of ensnaring the last generations, according to Mrs. White. Discovering the ways in which he uses it to his advantage would make a worthwhile study.

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APPENDIXES

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APPENDIX A

RESULTS OF EARLY ENVIRONMENT

Personality differences are marked during even the first year of life. Some varieties are, no doubt, dependent upon hereditary factors, but the influence of environment appears to be tremendous. To some, the suggestion that social experiences of babies vary greatly may be surprising, because we tend to think of all babies as living such simple lives that differences in experience would be reduced to a minimum.

In a study of 100 one-year-old babies that was undertaken for another purpose, an informal record was kept of each baby's emotional reactions to a situation in which he was encouraged to do something which required considerable effort on his part. Some of the observations are outlined in the following excerpts. . . .

Emily at the age of one year was a good-natured, healthy, happy baby, essentially normal in physical development. When brought into the laboratory she responded happily to strangers and seemed inclined to invite them to frolic with her. Emily was placed upon the floor . . . and a toy which she liked was placed beyond her reach. She looked at the toy, immediately pulled her forces together, and reached for it in a vigorous, alert way. She was placed in such a position that she had to climb over a four-inch bridge in order to reach any of the toys she wanted. She accepted the situation amiably, looked at the experimenter, and at her mother, and then with a great effort climbed upon the bridge and down again, reached the toy and seized it laughingly. . . .

Julie presents an interesting contrast. When she was brought to the laboratory she clung to her mother, although she did not cry when strangers approached her. She went into the experimental room quite willingly and was placed upon the floor with a toy just beyond her reach. Julie looked at the toy and immediately her lip began to quiver. She reached a pathetic little hand to her mother, turned appealingly to her, whimpered, and waited for her mother to come to her rescue. . . .

Anne was a different kind of little person. She was serious and undemonstrative while in the clinic. She left her mother without a protest and went with the examiner into the experimental room, although her mother followed. When Anne was placed upon the floor, with the toys just beyond her reach, she immediately made a great effort, crawled to get a toy, picked it up, examined it seriously and demon-

strated little joy at her success. Anne was then placed behind the bridge with a toy on the opposite side. She climbed upon the bridge and down again and crawled after the toy in the same sober, determined, quiet manner that had characterized her behavior before. We wondered if businesslike Anne would have not been a different baby if she had lived the first year of her life under the guidance of fretful Julie's mother and father.¹

¹Bess V. Cunningham, Psychology for Nurses, pp. 283-85.

APPENDIX B

EXPLANATION OF FIGURES

The figures show the effects of three different medications. These effects are produced through the nervous system. The last one shows the different reflex areas which are used to gain results in hydrotherapy treatments. It will be noted that morphine, for instance, contracts the pupils while atropine dilates them. This is because these drugs act on the brain center responsible for this function, and through the oculomotor nerves from the brain to the pupils.

Morphine (Figure 2, page 71) causes vomiting in some persons because it stimulates the vomiting center in the medulla and the response reaches the stomach through the vagus nerves. On the other hand, atropine (Figure 3, page 72) inhibits the vagus nerves and lessens gastric secretion and motility. Morphine inhibits the respiratory center, while atropine and caffeine (Figure 4, page 73) stimulate it.

These are only a few possibilities of effects to be obtained from the use of just these three drugs, as can be seen from study of the figures. Besides these, there are a great many more medications which act in similar fashion to cure disease through the regulation of function.

Hydrotherapy, too (Figure 5, page 74), acts directly, through the nervous system. Like the medications discussed, it acts on the brain centers and their extensions. It also acts upon reflex areas. Function is stimulated or inhibited by means of the temperatures used and the length of their application.

Some advantages of hydrotherapy are evident: it accomplishes its results through external application, it can be used locally, and its general effect is not toxic. Medications are less selective. When atropine is given to inhibit parasympathetic activity to the stomach, the whole parasympathetic system is included. Any medicine is finally destroyed by the liver, burned in the metabolic processes, or excreted by the kidneys. When hydrotherapy is used on the liver it acts on its function, but does not add toxins to be destroyed. It increases metabolism to take care of poisons already present, but does not add others to be burned. When used in a way that increases kidney function, it helps throw off the toxins of disease, not the end products of materials that have been given to correct some function. After a hydrotherapy treatment there is a feeling of well-being, both mental and physical, that drugs do not produce.

But medications, too, have advantages. Their effects can usually be kept constant, while hydrotherapy effects pass off between treatments. When there is great prostration, medications can be given when exhausting treatment would prove too vigorous. They can be used for quick and effective stimulation when hydrotherapy would not be available or would be too slow-acting. Sometimes a few doses of medicine will take hold and do what hydrotherapy seems almost impotent to do. There is also a realm of medical specifics that are not duplicated in hydrotherapy, like the antibiotics in infections and quinine in malaria.

APPENDIX C

FURTHER QUOTATIONS FROM MRS. WHITE ON MIND CURE IN MEDICAL PRACTICE

Many seek medical advice and treatment who have become moral wrecks through their own wrong habits. They are bruised, and weak, and wounded, feeling their folly and their inability to overcome. Such ones should have nothing in their surroundings to encourage a continuance of the thoughts and feelings that have made them what they are. They need to breathe an atmosphere of purity, of high and noble thought.¹

The physician needs more than human wisdom and power that he may know how to minister to the many perplexing cases of disease of the mind and heart with which he is called to deal. If he is ignorant of the power of divine grace, he cannot help the afflicted one, but will aggravate the difficulty; but if he has a firm hold upon God, he will be able to help the diseased, distracted mind. He will be able to point his patients to Christ, and teach them to carry all their cares and perplexities to the great Burden-bearer.

There is a divinely appointed connection between sin and disease. No physician can practice for a month without seeing this illustrated. He may ignore the fact; his mind may be so occupied with other matters that his attention will not be called to it; but if he will be observing and honest, he cannot help acknowledging that sin and disease bear to each other the relationship of cause and effect. The physician should be quick to see this, and act accordingly. When he has gained the confidence of the afflicted by relieving their sufferings and bringing them back from the verge of the grave, he may teach them that disease is the result of sin; and that it is the fallen foe who seeks to allure them to health-and-soul-destroying practices. He may impress their minds with the necessity of denying self, and obeying the laws of life and health. In the minds of the young especially he may instill right principles.²

Frankness in dealing with a patient inspires him with confidence, and thus proves an important aid to recovery. . . . It may not always be safe or best to explain to the patient the full extent of his danger. This might alarm him and retard or even prevent recovery. Nor can the

¹White, MH, p. 133. ²White, 5T, pp. 444-45.

whole truth always be told to those whose ailments are largely imaginary. Many of these persons are unreasonable, and have not accustomed themselves to exercise self-control. They have peculiar fancies, and imagine many things that are false in regard to themselves and to others. To them these things are real, and those who care for them need to manifest constant kindness and unwearied patience and tact. If these patients were told the truth in regard to themselves, some would be offended, others discouraged. Christ said to His disciples, "I have yet many things to say unto you, but ye cannot bear them now." . . . Never should the physician or the nurse stoop to prevarication. He who does this places himself where God cannot co-operate with him; and in forfeiting the confidence of his patients, he is casting away one of the most effective human aids to their restoration.³

On the pages of memory are sad histories that are sacredly guarded from curious eyes. There stand registered long, hard battles with trying circumstances, perhaps troubles in the home life, that day by day weaken courage, confidence, and faith. Those who are fighting the battle of life at great odds may be strengthened and encouraged by little attentions that cost only a loving effort. To such the strong, helpful grasp of the hand by a true friend is worth more than gold or silver. Words of kindness are as welcome as the smiles of angels.⁴

Great wisdom is needed in dealing with diseases caused through the mind. A sore, sick heart, a discouraged mind, needs mild treatment. Many times some living home trouble is, like a canker, eating to the very soul, and weakening the life force. And sometimes it is the case that remorse for sin undermines the constitution and unbalances the mind. It is through tender sympathy that this class of invalids can be benefited. The physician should first gain their confidence, and then point them to the great Healer. If their faith can be directed to the true Physician, and they can have confidence that He has undertaken their case, this will bring relief to the mind, and often give health to the body.

Sympathy and tact will often prove a greater benefit to the sick than will the most skilful treatment given in a cold, indifferent way. When a physician comes to the sick-bed with a listless, careless manner, looks at the afflicted one with little concern, by word or action giving the impression that the case is not one requiring much attention, and then leaves the patient to his own reflections, he has done that patient positive harm. The doubt and discouragement produced by his indifference will often counteract the good effect of the remedies he may prescribe.⁵

³White, *M.H.* p. 245.

⁴*Ibid.*, p. 158.

⁵*Ibid.*, p. 244.

How little we enter into sympathy with Christ on that which should be the strongest bond of union between us and Him,--compassion for the depraved, guilty, suffering souls, dead in trespasses and sins!⁶

Whatever the evil habits, the strong prejudices, or the overwhelming passion of human beings, He met them all with pitying tenderness. As we partake of His Spirit, we shall regard all men as brethren, with similar temptations and trials, often falling, and struggling to rise again, battling with discouragements and difficulties, craving sympathy and help. Then we shall meet them in such a way as not to discourage or repel them, but to awaken hope in their hearts. As they are thus encouraged, they can say with confidence, "Rejoice not against me, O mine enemy: when I fall I shall arise again; when I sit in darkness, the Lord shall be a light unto me."⁷

We need more of Christlike sympathy; not merely sympathy for those who appear to be faultless, but sympathy for poor, suffering, struggling souls, who are often overtaken in fault, sinning and repenting, tempted and discouraged. We are to go to our fellowmen, touched, like our merciful High Priest, with the feeling of their infirmities.⁸

⁶Ibid., p. 163.

⁷Ibid., pp. 165-66. The Scripture is Micah 7:8.

⁸Ibid., p. 164.

Mabel Klopfenstein Gill, Pacific Union College, 1940.

"Modern Concepts of Mind and Body in the Light of the Teaching of the Bible and the Writings of Ellen G. White: A Comparative Study."

Master of Arts, June, 1959.

Purpose of the study. This study has been made with the purpose of discovering what the writings of Ellen G. White contain on the subject of psychology. After considerable exploration, so much material accumulated that it became necessary to limit the subject to a single phase of psychology. The subject of mind and body has been chosen from this material.

Procedure. The original procedure was a systematic reading of all the volumes of Mrs. White's books available, marking such passages as were applicable. These were then typed out and finally arranged in logical order under appropriate heads. For this thesis relevant quotations were selected and their number reduced to the shortest and most pertinent ones. Notes from other authors were kept, and as these two types of sources were brought together it became necessary to round out the whole by consulting many other authorities. As developments proceeded and more aspects evolved, it was also necessary to clarify these with even further research.

Major findings. The major findings are listed below and follow the order in which they are treated in the complete thesis.

1. As soon as sin entered, mind and body became involved. Fear and guilt set up emotional reactions foreign to the sinless state. It was these emotional reactions that eventually broke down the life forces and brought on disease and death.

2. The death of Christ resulted from both mental and physical suffering. The payment of the penalty was in accord with the implications of the transgression.

3. Mind and body are so intimately connected that the whole organism responds to every stimulus, whether it is mental or physical at its origin.

4. There are certain basic needs, needs in which either mental or physical predominate, but in which both always co-operate. These needs are the simple physical needs connected with survival, and the emotional needs of security, recognition, love, and self-realization.

5. The nervous system, particularly the autonomic or involuntary division, along with the endocrine system, are of outstanding importance in mind and body relationships. This is because they are so intimately connected with the emotional centers in the brain.

6. Vast individual differences exist in the capacity to respond to stimuli. These differences are inherent in the constitutional make-up, especially the nervous system. They have much to do with making individuals susceptible or resistant to psychosomatic disease.

7. Not only is there a hereditary background for individual differences, but environment makes a large contribution to both physical and emotional development.

8. Environment begins prenatally and moves along into the home, then extends into the environmental culture and mores outside the home. Education, religion, associations, and the occupation all affect both the physical and the emotional life. Most serious of all is the

fact that the foundations for mind and body well-being are being laid so early that the individual has not developed moral responsibility. This must be assumed by the parents.

9. Right habits of thought are as important to physical health as they are to the moral and intellectual aspects of personality.

10. There are mind and body relations that are right, and there are some that are wrong. Domination, hypnotism, brainwashing, all allow a human being to invade the mind of another human being and are contrary to moral freedom.

11. Not only does the mind affect the body, but the body affects the mind.

12. Disease began with sin and guilt. Guilt figures largely in human experience, and since it is uncomfortable, men have found many ways of dealing with it. But these ways are inadequate and illogical. In Christ's ministry to the sick He dealt with sin and guilt as well as sickness. His ministry included both mind and body.

13. Sickness and death are the results of the transgressions of the race, but there is also individual responsibility. The transgression of physical law figures as a cause of both psychosomatic and physical disease.

Recommendations. Because this research has proved so fruitful, and because there remain so many other possibilities along the same lines, the following recommendations are made.

1. Other aspects of psychology have much material to offer. Child psychology, adolescent psychology, and many other phases of

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psychology are abundantly represented in the writings of Mrs. White.

2. There are scattered statements on mental ability that could be collected and used in connection with the subject of tests and measurements. This would make an interesting study, possibly with less material than many other phases of psychology supply.

3. There are valuable statements that could be compiled and used in counseling, referring both to the problems of the client and to the practice of counseling.

4. If Satan comes to the final generations through psychology, if he is pleased with the present-day study of this subject, as is stated in the writings of Mrs. White, it would be profitable to try to discover what his methods are, and how they are met in these books.